

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

New York Life Insurance Company Political Action Committee

ADDRESS (number and street)

51 Madison Avenue

Room 1109

☐Check if different
than previously
reported. (ACC)

New York

NY

10010

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00158881

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☒

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

05

01

2009

through

05

31

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Helen Stagias

Signature of Treasurer

Electronically Filed by Helen Stagias

Date

06

18

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
New York Life Insurance Company Political Action Committee

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		314745.32
(b) Cash on Hand at Beginning of Reporting Period	332017.38	
(c) Total Receipts (from Line 19)	105967.54	528300.79
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	437984.92	843046.11
7. Total Disbursements (from Line 31)	98735.00	503796.19
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	339249.92	339249.92
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

New York Life Insurance Company Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	5	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	5	3	1	2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	67069.83	233449.85
(i) Itemized (use Schedule A)		
(ii) Unitemized	33853.73	286654.53
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	100923.56	520104.38
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➡	100923.56	520104.38
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	5000.00	8000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	43.98	196.41
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	105967.54	528300.79
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	105967.54	528300.79

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	2980.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	2980.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	98500.00	489000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	-15.00	6066.19
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	-15.00	6066.19
29. Other Disbursements.....	250.00	5750.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	98735.00	503796.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	98735.00	503796.19

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	100923.56	520104.38
34. Total Contribution Refunds (from Line 28(d))	-15.00	6066.19
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	100938.56	514038.19
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	2980.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	2980.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 268

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

HILL PAC

Mailing Address 1825 K Street NW
Suite 1000

City State Zip Code
Washington DC 20006

FEC ID number of contributing
federal political committee.

C C00363994

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 9

Transaction ID: 5201555

Amount of Each Receipt this Period

5000.00

Refund of misdeposited Hi-
llary Clinton for Preside-
nt 2008 Primary Contribu-
tion

B.

Full Name (Last, First, Middle Initial)

Hillary Clinton for President Debt

Mailing Address PO Box 101436

City State Zip Code
Arlington VA 22210

FEC ID number of contributing
federal political committee.

C C00358895

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 9

Transaction ID: 5201585

Amount of Each Receipt this Period

5000.00

[MEMO ITEM]

Check that was misdeposited

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David A. Ponder

Mailing Address 2705 Falling Timber Trail

City

Edgewater

State

MD

Zip Code

21037-1220

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1003603703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Pat Nowak

Mailing Address 98 Logwood Street

City

South Burlington

State

VT

Zip Code

05403-6444

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1003703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Rudy Pope

Mailing Address 4 Summerrules Road

City

Clarks Summit

State

PA

Zip Code

18411-1073

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1003713703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

160.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David Porter

Mailing Address 416 N Cordova Street

City

Burbank

State

CA

Zip Code

91505-3414

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1003853703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Darin J. Robinson

Mailing Address 4208 Westminster Place

City

Saint Louis

State

MO

Zip Code

63108-3014

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1010063703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. John Rocco, Jr.

Mailing Address 220 Broadway Suite 203

City

Lynnfield

State

MA

Zip Code

01940-2353

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1010373703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

258.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Walton W. Rogers

Mailing Address 504 Pinefield Drive

City

Severna Park

State

MD

Zip Code

21146-2320

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1011073703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Darlene Schrank

Mailing Address 41603 E Ruppert Road

City

Benton City

State

WA

Zip Code

99320-8720

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1017043703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Richard Schwartz

Mailing Address 3044 Kennington Way

City

Kokomo

State

IN

Zip Code

46902-5079

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2083.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1017503703

Amount of Each Receipt this Period

416.66

P/R Deduction (\$416.66 Monthly)

SUBTOTAL of Receipts This Page (optional)

541.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. C. E. Scrivner

Mailing Address 11925 Southeast 231st Place

City

Kent

State

WA

Zip Code

98031-3688

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1018043703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Sidney L. Seligstein

Mailing Address 1568 Massey Pointe Lane

City

Memphis

State

TN

Zip Code

38120-1317

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.69

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1018433703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Christopher L. Simons

Mailing Address 713 Carper Drive

City

Artesia

State

NM

Zip Code

88210-2344

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1021633703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

258.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas H. Smoot

Mailing Address 4711 39th Place

City

Sunnyside

State

NY

Zip Code

11104-4405

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1024003703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Michael A. Stefano, III

Mailing Address 18 Quaker Manor Lane

City

Patterson

State

NY

Zip Code

12563-2347

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1026573703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Gina M. Stoltz

Mailing Address 771 Libby Lane

City

Mandeville

State

LA

Zip Code

70471

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1027563703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

153.90

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Bill Terrill

Mailing Address 405 Riverview
PO Box 935

City State Zip Code
Craig CO 81626-0935

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1031033703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Demetrios Theodoropoulos

Mailing Address 6 Fleetwood Court

City State Zip Code
Orinda CA 94563-4004

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1031323703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jack A. Thomas

Mailing Address 1014 Lake Place

City State Zip Code
Montesano WA 98563-9504

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1031563703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

133.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Alana D. Thomson

Mailing Address 7 Frankel Road

City

Massapequa

State

NY

Zip Code

11758-7258

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1032243703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Tom Flournoy, Jr.

Mailing Address 2014 Carlyle Place
5300 Zebulon Road

City

Macon

State

GA

Zip Code

31210-2199

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR10363703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Mo-
nthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jason L. Hooz

Mailing Address 2868 S Palisades Avenue

City

Santa Cruz

State

CA

Zip Code

95062-5406

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR103703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

246.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Antonio Velazquez

Mailing Address 230 Campora Drive

City

Northvale

State

NJ

Zip Code

07647-1704

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1037093703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Billy J. Watson

Mailing Address 3435 Indian Lake Trail

City

Pelham

State

AL

Zip Code

35124-2718

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR10373703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Casey Weeks

Mailing Address 1686 Cypress Springs Lane

City

Collierville

State

TN

Zip Code

38017

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1041003703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

210.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Carol Wiley

Mailing Address 69-11A 188th Street

City

Flushing

State

NY

Zip Code

11365-3752

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1042993703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Billy R. Williams

Mailing Address 601 Montclair Way

City

Mobile

State

AL

Zip Code

36609-6539

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1043303703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Richard J. Witterschein

Mailing Address 50 Kemp Avenue

City

Fair Haven

State

NJ

Zip Code

07704-3504

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1045053703

Amount of Each Receipt this Period

57.70

P/R Deduction (\$28.85 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

176.31

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Scott Woodley

Mailing Address 1036 Primrose Lane

City

Fond Du Lac

State

WI

Zip Code

54935-1869

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1045793703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Wesley R. Young

Mailing Address 2101 Dayflower Trace

City

Cedar Park

State

TX

Zip Code

78613-5701

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1047963703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jerry L. Spivey

Mailing Address 1307 Fairway Drive

City

Elberton

State

GA

Zip Code

30635-2611

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR10483703

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

210.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Van Ewing

Mailing Address 1235 South Prairie Avenue
Unit 2909

City State Zip Code
Chicago IL 60605

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1049493703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Steve M. Landau

Mailing Address 45 Derby Avenue

City State Zip Code
Cedarhurst NY 11516-1709

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1049913703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Warren Budd, Jr.

Mailing Address PO Box 1723

City State Zip Code
Newnan GA 30264-1723

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR10503703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

126.96

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Dean H. Grant

Mailing Address 3669 Sussex Drive Northeast

City

Milledgeville

State

GA

Zip Code

31061-9382

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR10583703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Kimberly Bianchi

Mailing Address 6848 Route 9

City

Hudson

State

NY

Zip Code

12534-8909

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1061483703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. James R. Vandre

Mailing Address 17335 Robinson Road

City

Marysville

State

OH

Zip Code

43040-9029

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1061673703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

308.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Kevin S. Odell

Mailing Address 114 Perkins Mill Lane
PO Box 889

City State Zip Code
Claxton GA 30417-0889

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR10643703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67)

B.

Full Name (Last, First, Middle Initial)

Mr. Kermit R. Griner

Mailing Address 305 Crestfield Drive

City State Zip Code
Columbus GA 31904-2325

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR10683703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. Kent E. Moss

Mailing Address 11409 Paldao Road

City State Zip Code
Tampa FL 33618-3923

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR10783703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Mo-
nthly)

SUBTOTAL of Receipts This Page (optional)

316.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jay A. Ginn, III

Mailing Address 401 Prince Road

City

St. Augustine

State

FL

Zip Code

32086-4906

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR10823703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gary T. Baumgarten

Mailing Address 230 W Reading Way

City

Winter Park

State

FL

Zip Code

32789-6052

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR10843703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Salwyn M. Parker

Mailing Address 5805 Diamond Point Circle

City

El Paso

State

TX

Zip Code

79912

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
General Office Agency Standards Consul

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR10923703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

300.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Frank B. Dolph, III

Mailing Address 631 Intracoastal Drive

City

Fort Lauderdale

State

FL

Zip Code

33304-3618

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR10983703

Amount of Each Receipt this Period

80.00

P/R Deduction (\$80.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Curt L. Eskew, Jr.

Mailing Address 1680 Keely Lane

City

Sarasota

State

FL

Zip Code

34232-3061

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR11013703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67)

C.

Full Name (Last, First, Middle Initial)

Mr. Thomas G. Krach

Mailing Address 20670 Westminster Drive

City

Strongsville

State

OH

Zip Code

44149-6773

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR11113703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

285.15

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. William F. Lyon

Mailing Address 3809 Arbor Lane

City

Cincinnati

State

OH

Zip Code

45255-5628

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR11143703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Mark I. Burton

Mailing Address 22781 Foxridge

City

Mission Viejo

State

CA

Zip Code

92692-4703

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR11173703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. David R. Colflesh

Mailing Address 905 Olive
PO Box 37

City

Tarkio

State

MO

Zip Code

64491-0037

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR11183703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

433.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jim Bork

Mailing Address 2426 Gibley Park

City

Toledo

State

OH

Zip Code

43617-2233

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR11223703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. J. P. Lyons

Mailing Address 100 Royal Palm Way

City

Palm Beach

State

FL

Zip Code

33480-4213

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1133703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Larry E. Beebe

Mailing Address 3209 Stone Wall Road

City

Maumee

State

OH

Zip Code

43537-9593

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR11343703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

175.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Timothy I. Miller

Mailing Address 285 Main Street

City

Dunstable

State

MA

Zip Code

01827-1911

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.41

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR113703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Bill Hensel

Mailing Address 6996 Winfield Strasburg Rd. NW

City

Strasburg

State

OH

Zip Code

44680-8967

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR11393703

Amount of Each Receipt this Period

80.00

P/R Deduction (\$80.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. William H. Werfelman, Jr.

Mailing Address 195 Gallows Hill Road

City

Redding

State

CT

Zip Code

06896-1423

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1143703

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

196.94

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael C. Quilter

Mailing Address PO Box 443

City

London

State

OH

Zip Code

43140-0443

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR11553703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Michael A. Yashnyk

Mailing Address 83 Crestwood Boulevard

City

Farmingdale

State

NY

Zip Code

11735-5802

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR11673703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Paul E. Moyer

Mailing Address 3220 Briarcliff Drive

City

Findlay

State

OH

Zip Code

45840-4102

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR11703703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

287.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Wendy Feldman

Mailing Address 20202 E Superstition Drive

City

Queen Creek

State

AZ

Zip Code

85242-9760

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR11723703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Barbara F. Hinebaugh

Mailing Address 3201 Westmont Place

City

The Villages

State

FL

Zip Code

32162-7640

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR11753703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Dave Baker

Mailing Address 31686 Lake Road

City

Bay Village

State

OH

Zip Code

44140-1027

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR11763703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

183.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Steven D. Meier

Mailing Address 4575 Lanercost Way

City

Columbus

State

OH

Zip Code

43220-2916

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR11803703

Amount of Each Receipt this Period

85.00

P/R Deduction (\$85.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Fred Eisner

Mailing Address 432 E Glengary Circle

City

Highland Heights

State

OH

Zip Code

44143-3623

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR11883703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Peter W. Scheid

Mailing Address 3175 Scarborough Road

City

Cleveland Heights

State

OH

Zip Code

44118-4049

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR11913703

Amount of Each Receipt this Period

98.00

P/R Deduction (\$98.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

233.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Delores McGhee

Mailing Address 358 Hackensack Street
Apt. B

City State Zip Code
Wood Ridge NJ 07075-1332

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR11963703

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Mark Vahala

Mailing Address 500 Cedar Elm Court

City State Zip Code
Irving TX 75063-8467

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR12063703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Mo-
nthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Z. J. Sethna

Mailing Address 5607 Peninsula Park Drive

City State Zip Code
Houston TX 77041-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR12123703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

248.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Kishan Patel

Mailing Address 2761 Manu Court

City

Glenview

State

IL

Zip Code

60026-1077

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR12193703

Amount of Each Receipt this Period

200.00

P/R Deduction (\$200.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Edwin R. Bochtler

Mailing Address 11077 Saffold Way

City

Reston

State

VA

Zip Code

20190-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR12213703

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. David E. Levee

Mailing Address 982 Vernon Avenue

City

Glencoe

State

IL

Zip Code

60022-1266

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR12293703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

360.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. James Kageleiry

Mailing Address 8 Hayes Lane

City

Dover

State

NH

Zip Code

03820-4213

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR123703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Julius G. Alberico

Mailing Address 302 Silver Creek Lane

City

Norwalk

State

CT

Zip Code

06850-1646

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR12433703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Curtis T. Schultz

Mailing Address 2204 Cherokee Circle

City

Valparaiso

State

IN

Zip Code

46383-2284

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2083.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR12523703

Amount of Each Receipt this Period

416.66

P/R Deduction (\$416.66)

SUBTOTAL of Receipts This Page (optional)

620.52

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph H. Lee, Sr.

Mailing Address 16640 Kehrsgrrove Drive

City

Chesterfield

State

MO

Zip Code

63005-4539

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR12543703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Raman K. Patel

Mailing Address 3281 Pleasant Run

City

Northbrook

State

IL

Zip Code

60062-7411

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR12593703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Larry D. Massey

Mailing Address 3761 Mountain Way Cove

City

Snellville

State

GA

Zip Code

30039-8413

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR12663703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

233.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Tom Gavin

Mailing Address 449 Vista Court

City

Benicia

State

CA

Zip Code

94510-2715

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR12683703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Bev Spellbring

Mailing Address 3009 McColm Drive

City

Farmington

State

NM

Zip Code

87402-5259

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR12713703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Gregory C. Lavalle

Mailing Address 1377 Shadow Creek Drive

City

Fairview

State

TX

Zip Code

75069-1255

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR12773703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

180.15

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Amrit Mittal

Mailing Address 215 Rugeley Rdd

City

Western Springs

State

IL

Zip Code

60558-1954

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR12793703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. John T. Osterman

Mailing Address 1406 W Camino Real

City

Yuma

State

AZ

Zip Code

85364-6292

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR12983703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Steven J. Heussner

Mailing Address 201 Falling Water Drive

City

McKinney

State

TX

Zip Code

75070-8776

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR13073703

Amount of Each Receipt this Period

125.00

P/R Deduction (\$125.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

391.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David Duchene

Mailing Address 25 Kingsview Lane N

City

Plymouth

State

MN

Zip Code

55447-4319

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR13153703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Robert V. Schechter

Mailing Address 1448 Lakewood Road

City

Bloomfield

State

MI

Zip Code

48302-2751

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR13233703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. G. J. Pasman, Jr.

Mailing Address 7397 Heather Ridge Court Southeast

City

Caledonia

State

MI

Zip Code

49316-9010

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR13303703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

266.68

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey W. Slattery

Mailing Address 4052 Walton Ridge Court

City

Mason

State

OH

Zip Code

45040-5916

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR13313703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Brian T. Nowak

Mailing Address 6111 E Cobblestones Lane

City

Sylvania

State

OH

Zip Code

43560-9452

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR13343703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Varda N. Fink

Mailing Address 13325 Old Forge Road

City

Silver Spring

State

MD

Zip Code

20904-6328

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR13353703

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

263.86

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Jungen

Mailing Address N81W23285 Five Iron Way

City

Sussex

State

WI

Zip Code

53089-1558

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR13463703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gary E. Wendlandt

Mailing Address 45 Gramercy Park North
Apt. 2B

City

New York

State

NY

Zip Code

10010-6308

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Vice Chairman & Chief Investment Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR13493703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Gerry Stadler

Mailing Address E10011 Fawn Lane

City

Reedsburg

State

WI

Zip Code

53959-9632

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR13513703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

130.15

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Frank M. Covelli

Mailing Address 9134 Settlers Road

City

Madison

State

WI

Zip Code

53717-2751

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR13523703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Ken Olson

Mailing Address N6591 Potter Road
PO Box 100

City

Blk River Falls

State

WI

Zip Code

54615-0100

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR13563703

Amount of Each Receipt this Period

175.00

P/R Deduction (\$175.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Charles R. Nelson

Mailing Address 1326 Webster Avenue

City

Eau Claire

State

WI

Zip Code

54701-6588

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR13583703

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

255.48

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. George N. Ridings

Mailing Address 887 West Main Street
PO Box 1750

City State Zip Code
Richmond KY 40476-1750

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR13623703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. George Nichols, III

Mailing Address 10010 Gary Road

City State Zip Code
Potomac MD 20854-4149

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR13723703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jim Naive

Mailing Address 6256 Bell Road Court

City State Zip Code
Montgomery AL 36117-4357

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR13903703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

278.87

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Norman M. Bryant

Mailing Address 196 Mitoba Trail

City

Pelham

State

AL

Zip Code

35124

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR14023703

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Steven R. Kaneski

Mailing Address 9692 Sterling Pointe Court

City

Loomis

State

CA

Zip Code

95650-7120

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR14123703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Lloyd R. Wilson, Sr.

Mailing Address 3148 Pine Ridge Road

City

Birmingham

State

AL

Zip Code

35213-3906

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1333.33

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR14163703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

393.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Ross-Morris Sims

Mailing Address 91 Valley View Road

City

Cortlandt Manor

State

NY

Zip Code

10567-1235

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.79

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR14213703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. R. Frank Avrett

Mailing Address 4343 N Scottsdale Road
Suite 220

City

Scottsdale

State

AZ

Zip Code

85251-3344

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR14233703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. John F. De Buys, III

Mailing Address 2501 Country Club Circle

City

Birmingham

State

AL

Zip Code

35223-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR14243703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

357.72

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Tim Ellen

Mailing Address 113 Highland Pointe Drive

City

Lagrange

State

GA

Zip Code

30240-3791

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR14283703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Joe W. Donaldson

Mailing Address 106 Glynlakes Drive

City

Pike Road

State

AL

Zip Code

36064-1766

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR14373703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Kathy Morris

Mailing Address 117 Royal Drive Apt. 2903

City

Madison

State

AL

Zip Code

35758-2382

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR14383703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

250.02

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Patrick L. McCraw

Mailing Address 122 McDill Cove

City

Madison

State

MS

Zip Code

39110-6562

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR14413703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jerry Coats

Mailing Address 165 Pebble Beach Drive

City

Little Rock

State

AR

Zip Code

72212-2645

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR14563703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Mo-
nthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Timothy A. Martin

Mailing Address 619 Whorton Mount Road

City

London

State

AR

Zip Code

72847-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR14613703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

362.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas L. McConathy

Mailing Address 11813 Towering Oaks Drive

City

Baton Rouge

State

LA

Zip Code

70810-3162

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR14693703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Kathleen T. Davenport

Mailing Address 1337 Huron Avenue

City

Metairie

State

LA

Zip Code

70005-1233

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR14763703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. John Wemple

Mailing Address 7774 Copperfield Court

City

Baton Rouge

State

LA

Zip Code

70808-6770

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR14933703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

168.61

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Tim C. Fitzgerald

Mailing Address 12086 Ellerbe Road

City

Shreveport

State

LA

Zip Code

71115-9568

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR14943703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Dom V. Cianciotti

Mailing Address 3 Malcolms Landing

City

Northport

State

NY

Zip Code

11768-1559

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1503703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Maurice Springer

Mailing Address 25 Hickory Place
E28

City

Chatham

State

NJ

Zip Code

07928-1487

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR15053703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

320.54

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. John B. Stagg

Mailing Address 8816 S Lakewood Court

City

Tulsa

State

OK

Zip Code

74137-3124

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Managing Partner

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR15073703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Bryan S. Norris

Mailing Address 639 Loyola Avenue
Suite 1900

City

New Orleans

State

LA

Zip Code

70113-3188

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Managing Partner

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR15103703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Beaver Smith

Mailing Address 3922 Patterson Drive

City

New Orleans

State

LA

Zip Code

70114-1809

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR15153703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

349.39

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 268

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Sidney A. Triche

Mailing Address PO Box 159

City

Larose

State

LA

Zip Code

70373-0159

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	9

Transaction ID: PR15163703

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Mon-
thly)**B.**

Full Name (Last, First, Middle Initial)

Mr. Daryl R. Ellis

Mailing Address 521 Louray Court

City

Baton Rouge

State

LA

Zip Code

70808-6777

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	9

Transaction ID: PR15283703

Amount of Each Receipt this Period

70.00

P/R Deduction (\$70.00 Mon-
thly)**C.**

Full Name (Last, First, Middle Initial)

Mr. Joseph S. Bonin

Mailing Address 633 Gertrude Drive

City

St. Martinville

State

LA

Zip Code

70582-4935

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	9

Transaction ID: PR15303703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

195.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Christopher J. Prudhomme

Mailing Address 165 Emmons Canyon Lane

City

Alamo

State

CA

Zip Code

94507

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Zone Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR15383703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Samuel L. Hebert

Mailing Address 3307 Henderson Bayou Road

City

Lake Charles

State

LA

Zip Code

70605-2248

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR15403703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. Gordon D. Ellis, Jr.

Mailing Address 11410 Sugar Lane

City

Baton Rouge

State

LA

Zip Code

70810-2059

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR15463703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

278.87

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael T. Delahaye

Mailing Address 6415 Sevenoaks Avenue

City

Baton Rouge

State

LA

Zip Code

70806-7335

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR15473703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Bruce J. Vicknair

Mailing Address 201 Ashland Drive

City

Thibodaux

State

LA

Zip Code

70301-2901

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR15483703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Eric B. Campbell

Mailing Address 240 E 47th Street
Apt. 22C

City

New York

State

NY

Zip Code

10017-2136

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR15633703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

295.53

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael Noland

Mailing Address 5933 S Knoxville Avenue

City

Tulsa

State

OK

Zip Code

74135-7806

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR15693703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Fred Bangasser

Mailing Address 2108 Key West Cove

City

Austin

State

TX

Zip Code

78746-7256

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR15793703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Larry Bernard

Mailing Address 5100 San Felipe Street Unit 181E

City

Houston

State

TX

Zip Code

77056-3687

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR15803703

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

393.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Raymond Vitek, Jr.

Mailing Address 818 San Marino Street

City

Sugar Land

State

TX

Zip Code

77478-3328

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR15823703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Stephen G. Ray

Mailing Address 6230 Stefani Drive

City

Dallas

State

TX

Zip Code

75225-2121

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

769.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR15883703

Amount of Each Receipt this Period

76.93

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jim Erben

Mailing Address 302 Jack Nicklaus Drive

City

Austin

State

TX

Zip Code

78738-1714

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR15913703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

293.60

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael G. Morgan

Mailing Address 2791 Nightwind Court

City

Frisco

State

TX

Zip Code

75034-4669

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR15973703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gib Surles

Mailing Address 434 Westminster Drive

City

Houston

State

TX

Zip Code

77024-5609

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR16013703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Frank J. Ollari

Mailing Address 4430 Douglaston Parkway
Apt. 6F

City

Douglaston

State

NY

Zip Code

11363-1829

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1603703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

243.63

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Tom Ball, III

Mailing Address 2200 Westlake Drive

City

Austin

State

TX

Zip Code

78746-2933

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR16083703

Amount of Each Receipt this Period

80.00

P/R Deduction (\$80.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Lawson J. Schuford, Jr.

Mailing Address 201 Plano Street

City

Shreveport

State

LA

Zip Code

71103-2056

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.47

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR16103703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Frank Knox

Mailing Address 1904 Morning Star

City

Edmond

State

OK

Zip Code

73034-6541

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR16203703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

221.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. John Breedlove

Mailing Address 1227 Fisher Drive

City

Tyler

State

TX

Zip Code

75701-6929

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR16293703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Robert McKinley

Mailing Address 2121 North California Boulevard
Suite 550

City

Walnut Creek

State

CA

Zip Code

94596

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.79

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR16303703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Aurora Saenz

Mailing Address 2002 S Westgate Drive

City

Weslaco

State

TX

Zip Code

78596-9310

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR16403703

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

SUBTOTAL of Receipts This Page (optional)

287.19

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Elizabeth S. Gonzales

Mailing Address 10309 Yellowstone Drive

City

Austin

State

TX

Zip Code

78747-3947

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR16673703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Michael D. Burson

Mailing Address 261 South Main Street
#333

City

Newtown

State

CT

Zip Code

06470

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.41

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR16683703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Kevin R. Garman

Mailing Address 5012 Avenue Avignon

City

Lutz

State

FL

Zip Code

33558-2825

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR16733703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

280.80

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David M. Humbert

Mailing Address 6802 Canon Wren Drive

City

Austin

State

TX

Zip Code

78746-3803

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR16743703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Stuart Isgur

Mailing Address 2025 Huntington Lane

City

Fort Worth

State

TX

Zip Code

76110-1743

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR16783703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. Marcel R. Frey

Mailing Address 1703 S Medio River Circle

City

Sugar Land

State

TX

Zip Code

77478-5315

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR16823703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

320.54

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Rodger K. Johnson

Mailing Address 910 N Houston Street

City

Bullard

State

TX

Zip Code

75757-5128

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR16883703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas W. Robinson, Jr.

Mailing Address 12131 Broken Bough Drive

City

Houston

State

TX

Zip Code

77024-4253

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR16903703

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Steve Maus

Mailing Address 4821 Augusta Drive

City

Frisco

State

TX

Zip Code

75034-6841

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR17023703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

416.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. A. C. Tracy Wood, III

Mailing Address PO Box 12425

City

Dallas

State

TX

Zip Code

75225-0425

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR17033703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Marcus J. Ham

Mailing Address 8713 Maple Hollow Court

City

Granite Bay

State

CA

Zip Code

95746-6158

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR17083703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Patricia A. Doss

Mailing Address 23717 Rockrose Drive

City

Golden

State

CO

Zip Code

80401-9185

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR17093703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

474.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Mark D. Cates

Mailing Address 18273 Chappuis Trail

City

Faribault

State

MN

Zip Code

55021-7478

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR17143703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas D. Hegna

Mailing Address 16931 E Jacklin Drive

City

Fountain Hills

State

AZ

Zip Code

85268-5446

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR17163703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Ronald Karkela

Mailing Address 820 Recluse Court

City

Casper

State

WY

Zip Code

82609-3380

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR17203703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

349.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Mangala K. Pai-Panandiker

Mailing Address 19425 Vine Ridge Road

City

Excelsior

State

MN

Zip Code

55331-9173

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR17223703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. John Vaccaro

Mailing Address 270 W 11th Street
Apt. 2B

City

New York

State

NY

Zip Code

10014-2422

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.56

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1723703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jim Johnson

Mailing Address 1635 Cliff Avenue

City

Duluth

State

MN

Zip Code

55811-2101

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR17263703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

285.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Terry K. Lewis

Mailing Address 5612 Dale Avenue

City

Edina

State

MN

Zip Code

55436-2469

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR17343703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67)

B.

Full Name (Last, First, Middle Initial)

Mr. Marlyn L. McClain

Mailing Address 208 Parkwild Drive

City

Council Blfs

State

IA

Zip Code

51503-1759

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR17543703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Mo-
nthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Dennis J. Bell

Mailing Address 10576 Sunset Terrace

City

Clive

State

IA

Zip Code

50325-6554

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR17573703

Amount of Each Receipt this Period

80.00

P/R Deduction (\$80.00 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

413.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Gregory D. Jensen

Mailing Address 16850 Berkshire Court

City

Sw Ranches

State

FL

Zip Code

33331-1332

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR17603703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Brad L. Willson

Mailing Address 4905 Elm Street

City

Bellaire

State

TX

Zip Code

77401-2810

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR17683703

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Troy G. Braswell

Mailing Address 16843 Highland Ridge Drive

City

Belton

State

MO

Zip Code

64012

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR17903703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

347.72

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Galen D. Dody

Mailing Address 501 David Drive

City

Clinton

State

MO

Zip Code

64735-1948

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR17933703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. David A. Lyons

Mailing Address 405 Barrett Road

City

Lawrence

State

NY

Zip Code

11559-2702

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18043703

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Joel P. Blanchard

Mailing Address 5608 S Deer Park Drive

City

Sioux Falls

State

SD

Zip Code

57108-2013

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18223703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

403.86

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Greg Blanchard Clu Chfc

Mailing Address 4720 W 127th Place

City

Broomfield

State

CO

Zip Code

80020-5737

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18233703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Rich Garry

Mailing Address 805 W Batcheller Lane

City

Sioux Falls

State

SD

Zip Code

57105-6715

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18293703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Steve Garry

Mailing Address 2600 East Orchard Trail

City

Sioux Falls

State

SD

Zip Code

57103-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18303703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

416.68

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jonathan Matrullo

Mailing Address 35 Deer Run

City

Hope

State

RI

Zip Code

02831-1102

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18326963703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)

B.

Full Name (Last, First, Middle Initial)

Ms. Christine M. Park

Mailing Address 765 Mosswood Avenue

City

South Orange

State

NJ

Zip Code

07079

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.56

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18332243703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Craig A. Merdian

Mailing Address 40 Bovensiepen Court

City

Roseland

State

NJ

Zip Code

07068-1128

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18332863703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

260.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Steven D. Lash

Mailing Address 66 Everett Road

City

Demarest

State

NJ

Zip Code

07627-1225

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Senior Vice President

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18333573703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Roger H. Morris

Mailing Address 2101 N Westwood Avenue

City

Santa Ana

State

CA

Zip Code

92706-1943

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18393703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Joe Kruse

Mailing Address 609 E St. Andrews Circle

City

Dakota Dunes

State

SD

Zip Code

57049-5133

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18423703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

293.61

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Mike Norman

Mailing Address 5977 Blue Hills Court

City

Reno

State

NV

Zip Code

89502-8708

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18463703

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Shane M. Swanson

Mailing Address 316 E Ranney Avenue

City

Vernon Hills

State

IL

Zip Code

60061-4132

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Zone Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18553703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Chip May

Mailing Address 2009 Royal Club Court

City

Arlington

State

TX

Zip Code

76017-4434

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18623703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

328.86

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. John R. Meyer

Mailing Address 996 Stafford Avenue

City

Staten Island

State

NY

Zip Code

10309-2110

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1863703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Larry Buckner

Mailing Address 4545 Circle View Boulevard

City

Los Angeles

State

CA

Zip Code

90043-1151

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18643703

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. Royse J. Huff

Mailing Address 506 Fairway Place

City

Fairfield

State

IA

Zip Code

52556-3630

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18673703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

320.53

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. O. L. Elrick, Jr.

Mailing Address 1440 N Gatewood Street Apt. 51

City

Wichita

State

KS

Zip Code

67206-1253

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18843703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Kevin R. Johnson

Mailing Address 100 Street of Dreams

City

Village Loch Loyd

State

MO

Zip Code

64012-4179

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18853703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. John J. McKenna, Jr.

Mailing Address 110 Churn Creek Drive

City

Bozeman

State

MT

Zip Code

59715-7872

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18913703

Amount of Each Receipt this Period

150.00

P/R Deduction (\$150.00)

SUBTOTAL of Receipts This Page (optional)

366.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David S. Sell

Mailing Address 60 Revere Lane

City

Fairfield

State

CT

Zip Code

06824-7829

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18927313703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Rakesh Bansal

Mailing Address 1 Horseshoe Court

City

Monroe

State

NJ

Zip Code

08831-2368

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR1893703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. John P. Schwan

Mailing Address 1320 N Arch Street

City

Aberdeen

State

SD

Zip Code

57401-2147

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18973703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

410.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Scott Alexander

Mailing Address 16252 Placerita Canyon Road

City

Santa Clarita

State

CA

Zip Code

91321-3302

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR18983703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jeff Marsh

Mailing Address 1749 W 15th Avenue

City

Torrington

State

WY

Zip Code

82240-3706

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR19173703

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33)

C.

Full Name (Last, First, Middle Initial)

Mr. David R. Somerville, Jr.

Mailing Address 725 Rosarita Drive

City

Fullerton

State

CA

Zip Code

92835-1842

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR19263703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Murray Pruetz

Mailing Address 2626 W Walatowa Street

City

Phoenix

State

AZ

Zip Code

85041-9626

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR19323703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. James J. Killgore

Mailing Address 4123 Campus Green Loop Northeast

City

Lacey

State

WA

Zip Code

98516-6241

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR19333703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Scott Maycock

Mailing Address 359 County Road 250

City

Durango

State

CO

Zip Code

81301-6976

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR19343703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

191.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph L. Tigert

Mailing Address 8620 Brentmoor Street

City

Wichita

State

KS

Zip Code

67206-2404

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR19433703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Kap-Sun Enders

Mailing Address 10620 Washington Circle

City

Anchorage

State

AK

Zip Code

99515-2505

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.02

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR19503703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. Steven T. Mindak

Mailing Address 9290 E Thompson Peak Pkwy. Unit 41

City

Scottsdale

State

AZ

Zip Code

85255-4514

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR19523703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Mo-
nthly)

SUBTOTAL of Receipts This Page (optional)

403.87

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Carrie L. Hall

Mailing Address 5628 E Monterosa Street

City

Phoenix

State

AZ

Zip Code

85018-4646

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR19533703

Amount of Each Receipt this Period

300.00

P/R Deduction (\$300.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jan Christensen

Mailing Address 2356 Bear Hills Drive

City

Draper

State

UT

Zip Code

84020-9672

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR19713703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. William C. Gallagher

Mailing Address 8991 S Cobble Canyon

City

Sandy

State

UT

Zip Code

84093

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR19793703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

543.61

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Wallace

Mailing Address 1654 Wheatgrass Court

City

Reno

State

NV

Zip Code

89509-6912

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR19803703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gary Bacon

Mailing Address 1099 Kentfield Drive

City

Salinas

State

CA

Zip Code

93901-1067

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR19843703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Bob D. Hall

Mailing Address 2015 Evergreen Court

City

Yakima

State

WA

Zip Code

98902-1200

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR19863703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

300.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Rick G. Austin

Mailing Address 6509 Claret Court

City

Kansas City

State

MO

Zip Code

64152-6084

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR19943703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Stephen G. Bakke

Mailing Address 3865 Welsh Pony Lane

City

Yorba Linda

State

CA

Zip Code

92886-7929

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR20053703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Sharon A. Rockett

Mailing Address 310 6th Street

City

Raymond

State

WA

Zip Code

98577-2503

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

558.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR20113703

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

395.53

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Dan Fortier

Mailing Address 8706 Webster Avenue

City

Yakima

State

WA

Zip Code

98908-9309

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR20173703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gordon D. Schuster

Mailing Address 1230 Leanne Place

City

Wenatchee

State

WA

Zip Code

98801-3253

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR20203703

Amount of Each Receipt this Period

125.00

P/R Deduction (\$125.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jack Whitehead

Mailing Address 20782 Southwest Hillboro Hy

City

Newberg

State

OR

Zip Code

97132-9412

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR20353703

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

226.67

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 268

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Robert L. Cannon, III

Mailing Address 30700 19th Avenue S

City

Federal Way

State

WA

Zip Code

98003-5103

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR20393703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Mo-
nthly)**B.**

Full Name (Last, First, Middle Initial)

Mr. Robert J. Fincham, Jr.

Mailing Address 19333 Soda Springs Drive

City

Bend

State

OR

Zip Code

97702-1091

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR20423703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Mo-
nthly)**C.**

Full Name (Last, First, Middle Initial)

Mr. John B. Whitehead

Mailing Address 11365 Southwest Bobwhite Place

City

Beaverton

State

OR

Zip Code

97007

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.33

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR20433703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

343.61

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 268

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas E. Beck

Mailing Address 679 Lincoln Street

City

Santa Clara

State

CA

Zip Code

95050-5318

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR20443703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)**B.**

Full Name (Last, First, Middle Initial)

Ms. Victoria Simmaly

Mailing Address 235 Flournoy Street

City

San Francisco

State

CA

Zip Code

94112-3910

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR20533703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)**C.**

Full Name (Last, First, Middle Initial)

Mr. Yoshio Kinjo

Mailing Address 241 S Peralta Hills Drive

City

Anaheim

State

CA

Zip Code

92807-3425

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR20603703

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Barbara L. Cole

Mailing Address 1052 S Laughingbrook Court

City

Anaheim

State

CA

Zip Code

92808-2136

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR20613703

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Katherine Huebert

Mailing Address 294 Robinwood Circle

City

Reedley

State

CA

Zip Code

93654-2767

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR20703703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. William V. Brody

Mailing Address 19 Corte Miguel

City

San Rafael

State

CA

Zip Code

94903-1810

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR20783703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 268

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Stanley F. Goodin

Mailing Address 6117 Carriage House Way

City

Reno

State

NV

Zip Code

89519-7324

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	0	9

Transaction ID: PR20823703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Christie S. Mueller

Mailing Address 6841 Ripley Lane N

City

Renton

State

WA

Zip Code

98056-1529

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	0	9

Transaction ID: PR20993703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Stephen C. Dill

Mailing Address 4082 Prestwick Lane

City

Palmdale

State

CA

Zip Code

93551-5381

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	0	9

Transaction ID: PR21023703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Robert H. Perry

Mailing Address 1227 Meadow Ridge Road

City

Sandy

State

UT

Zip Code

84094-5713

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR21043703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Louis L. Murray, Jr.

Mailing Address 71 Manthorpe Road Apt. 2

City

West Roxbury

State

MA

Zip Code

02132-4426

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR211443703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Narottam N. Patel

Mailing Address 10 Ashwood Mall Apt. B

City

Old Bridge

State

NJ

Zip Code

08857-4517

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR211723703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

250.02

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 268

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Deborah Lewis

Mailing Address 1300 S Arlington Ridge Rd. Apt. 31

City

Arlington

State

VA

Zip Code

22202-1964

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	0	9

Transaction ID: PR211733703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)**B.**

Full Name (Last, First, Middle Initial)

Mr. E. Mark Lewis

Mailing Address 1751 2nd Avenue Apt. 20

City

New York

State

NY

Zip Code

10128-5363

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	0	9

Transaction ID: PR211753703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)**C.**

Full Name (Last, First, Middle Initial)

Mr. Mark Heinemann

Mailing Address 1 Hanford Street

City

Melville

State

NY

Zip Code

11747-1323

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	0	9

Transaction ID: PR211893703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

133.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. John A. Forte

Mailing Address 1 Chandler Drive

City

Ballston Lake

State

NY

Zip Code

12019-1335

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR211923703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. David Brown

Mailing Address 524 Terrace Avenue

City

Garden City

State

NY

Zip Code

11530-5442

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR211943703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Otto A. Kuehne

Mailing Address 6213 Ranch View Dr. N

City

East Amherst

State

NY

Zip Code

14051-2094

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR211993703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

258.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Ronnie D. Weller

Mailing Address 723 Whig Hill Road

City

Tionesta

State

PA

Zip Code

16353-8046

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR212133703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Richard L. Dietz

Mailing Address 14 Cardinal Drive

City

Poughkeepsie

State

NY

Zip Code

12601-5719

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR212153703

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. John E. Horstmann

Mailing Address 7684 N Kincaid Avenue

City

Fresno

State

CA

Zip Code

93711-0363

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR21223703

Amount of Each Receipt this Period

90.00

P/R Deduction (\$90.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

215.34

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 268

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. John T. Alexander

Mailing Address 372 Baymount Drive

City

Statesville

State

NC

Zip Code

28625-9548

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR212343703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)**B.**

Full Name (Last, First, Middle Initial)

Mr. Jeffrey M. Hudson

Mailing Address 6218 Seminary Road

City

Columbus

State

GA

Zip Code

31904-2933

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR212423703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Mo-
nthly)**C.**

Full Name (Last, First, Middle Initial)

Mr. Scott McKnight

Mailing Address 520 Pitchercane Road

City

Hot Springs

State

AR

Zip Code

71901-8402

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR212453703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

300.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael P. Daly

Mailing Address 1426 State Route 125

City

Hamersville

State

OH

Zip Code

45130-9509

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR212493703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Todd Olig

Mailing Address 1006 Dewey Street

City

Kiel

State

WI

Zip Code

53042-1242

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR212733703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Oscar A. Anzaldo

Mailing Address 2704 Bonniebrook Drive

City

Stockton

State

CA

Zip Code

95207-1308

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR21283703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

266.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Joe Littlejohn

Mailing Address 111 Robert E Lee Place

City

Bossier City

State

LA

Zip Code

71111-5025

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR212953703

Amount of Each Receipt this Period

42.00

P/R Deduction (\$42.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Budo Perry

Mailing Address 305 S Scott Street

City

Fort Gibson

State

OK

Zip Code

74434-8722

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR212993703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Gene Silvis

Mailing Address 9837 E 85th Street

City

Tulsa

State

OK

Zip Code

74133-4521

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR213003703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

250.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Sanford Bressick

Mailing Address 611 El Dorado Court

City

Santa Rosa

State

CA

Zip Code

95404-2116

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR21303703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. S. C. Patterson

Mailing Address 1501 Presto Way Northwest

City

Albuquerque

State

NM

Zip Code

87104-2396

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR213073703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Zerbe M. Mellish

Mailing Address 2503 Valleyfield Drive

City

Houston

State

TX

Zip Code

77080-4406

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR213113703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

166.68

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jerry M. Fish

Mailing Address 16 Waterford Lane

City

Beachwood

State

OH

Zip Code

44122

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR21313703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Sue Zwiener

Mailing Address 10630 Dodge Mower Road

City

Blmng Prairie

State

MN

Zip Code

55917-6934

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR213243703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. Mark A. Wiskus

Mailing Address 1005 Edgewater Drive

City

Pella

State

IA

Zip Code

50219-7669

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR213343703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Mo-
nthly)

SUBTOTAL of Receipts This Page (optional)

303.86

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael Brown

Mailing Address 8976 Northeast Patton Road

City

Hamilton

State

MO

Zip Code

64644-9166

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR213413703

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Michael D. Bookout

Mailing Address 24760 Eagle River Road

City

Eagle River

State

AK

Zip Code

99577

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR213493703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Brian K. Freckleton

Mailing Address 3830 Saddleback Road

City

Park City

State

UT

Zip Code

84098-4808

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR213553703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

171.81

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. E. Jay Bond

Mailing Address 6670 E Green Lake Way N

City

Seattle

State

WA

Zip Code

98103-5419

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR213573703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Richard J. Werner

Mailing Address 1380 King James Court

City

Oak Park

State

CA

Zip Code

91377-4738

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR21363703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Joe Hong

Mailing Address 317 Edgewater Drive

City

Milpitas

State

CA

Zip Code

95035-4428

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR213673703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

416.68

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Forrest G. Hindley

Mailing Address 17609 White Marble Drive

City

Monument

State

CO

Zip Code

80132-7445

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR21383703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Annamalai Palani

Mailing Address 5837 Corte Mente

City

Pleasanton

State

CA

Zip Code

94566-5872

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR213843703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Eric K. Takao

Mailing Address 752 Pahumele Place

City

Kailua

State

HI

Zip Code

96734-3513

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR213863703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

375.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jesse Rivera

Mailing Address 9808 Zircon Drive Southwest

City

Lakewood

State

WA

Zip Code

98498-3421

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR213893703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Bill Regan, III

Mailing Address 790 Bromfield Road

City

San Mateo

State

CA

Zip Code

94402-1115

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR214023703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jerry Sullivan

Mailing Address 204 Paseo Arboles

City

Fairfield

State

CA

Zip Code

94534-1514

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR214033703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34)

SUBTOTAL of Receipts This Page (optional)

291.68

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Leslie Coddington

Mailing Address 626 Fitzsimmons Road

City

Milan

State

NY

Zip Code

12571

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR214163703

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jerry Macias

Mailing Address 1530 Avenida Quintas

City

Las Cruces

State

NM

Zip Code

88001-3509

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR21433703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Jeanne M. Carbone

Mailing Address 30 Eagle Court

City

White Plains

State

NY

Zip Code

10605

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.97

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR2143703

Amount of Each Receipt this Period

67.32

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

157.32

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Angelo A. Haddad

Mailing Address 354 Garnsey Avenue

City

Bakersfield

State

CA

Zip Code

93309-1849

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR21453703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Patrick D. Miller

Mailing Address 265 Mountain Crest Road

City

Duarte

State

CA

Zip Code

91010-1537

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR21473703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Kevin Choi

Mailing Address 4442 Saint Clair Avenue

City

Studio City

State

CA

Zip Code

91604-1207

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR215313703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

403.87

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 / 268

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Zaniwski

Mailing Address 4196 Pacifico Lane

City

Las Vegas

State

NV

Zip Code

89135-2524

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Life Product Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR215333703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Jeannette L. Meitz

Mailing Address 3734 Vancouver Drive

City

Reno

State

NV

Zip Code

89511-6048

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

National Life Sales Coordinator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR215343703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Rick K. Stivers

Mailing Address 129 Hartland Drive Unit 8A

City

Myrtle Beach

State

SC

Zip Code

29572-2215

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR21543703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

255.15

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Robert J. Polilli

Mailing Address 4522 Perdita Lane

City

Lutz

State

FL

Zip Code

33558-9079

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Vice President

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR215453703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Larry Tover

Mailing Address 4839 Hermano Drive

City

Tarzana

State

CA

Zip Code

91356-4517

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR21553703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Debra A. Bronzo

Mailing Address 107 Marsh Hill Road

City

Putnam Valley

State

NY

Zip Code

10579

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Vice President

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR215553703

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

158.61

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Albert J. Schiff

Mailing Address 11 Mohawk Lane

City

Greenwich

State

CT

Zip Code

06831-3125

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR215593703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Tony Bolado

Mailing Address 698 N Helena Street

City

Anaheim

State

CA

Zip Code

92805-2620

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR21683703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Cynthia R. Bolker

Mailing Address 147 27th Street

City

Del Mar

State

CA

Zip Code

92014-2043

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR21713703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

278.87

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Ray Triplett

Mailing Address 16171 Hillvale Avenue

City

Monte Sereno

State

CA

Zip Code

95030-4159

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR21723703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. William Anders

Mailing Address 15 Grand Place

City

Newtown

State

CT

Zip Code

06470-2113

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Associate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR21763703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Douglas G. Sawicki

Mailing Address 114 Bushwick Road

City

Poughkeepsie

State

NY

Zip Code

12603-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR2183703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

282.09

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 100 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Tom Cox

Mailing Address 21837 Junebug Road

City

Grass Valley

State

CA

Zip Code

95949-8998

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR21843703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Nick Ameli, Jr.

Mailing Address 4113 Coal Heritage Road

City

Bluemwell

State

WV

Zip Code

24701-9193

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR218813703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. John Wolff

Mailing Address 120 Willow Avenue

City

Roseville

State

CA

Zip Code

95678-3232

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR218893703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

141.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Doug Wills

Mailing Address 12410 W Auburn Avenue

City

Lakewood

State

CO

Zip Code

80228-4986

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR218913703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Bryan Buzzard

Mailing Address 3311 E Dartmouth Street

City

Mesa

State

AZ

Zip Code

85213-7046

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR218923703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. David L. Aguirre

Mailing Address 7518 S 240 E

City

Midvale

State

UT

Zip Code

84047-2169

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR218933703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 102 / 268

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Richard L. Mucci

Mailing Address 87 Northgate

City

Avon

State

CT

Zip Code

06001-4077

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Chairman & Chief Executive Officer

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR22041263703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. L. B. Nole

Mailing Address 7689 Tahiti Lane

City

Lake Worth

State

FL

Zip Code

33467-4945

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR22073703

Amount of Each Receipt this Period

125.00

P/R Deduction (\$125.00 Mo-
nthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Barbara J. Norman

Mailing Address 12847 Seabreeze Farms Drive

City

San Diego

State

CA

Zip Code

92130-3736

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

233.34

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR22193703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

328.86

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Bessie Lee

Mailing Address 1210 Dana Avenue

City

Palo Alto

State

CA

Zip Code

94301-3111

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR22203703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. John J. Englert

Mailing Address 4948 Saratoga Drive

City

Redding

State

CA

Zip Code

96002-9419

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR22233703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Richard Paulsen

Mailing Address 6280 Crooked Stick Circle

City

Stockton

State

CA

Zip Code

95219-1859

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR22253703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

258.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Kulbhusan L. Sareen

Mailing Address 405 Darrell Road

City

Hillsborough

State

CA

Zip Code

94010-6709

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR22283703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Mitchell D. Rosenberg

Mailing Address 870 Camino El Carrizo

City

Thousand Oaks

State

CA

Zip Code

91360-2324

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR22363703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. James A. Allen

Mailing Address 710 Avery Street

City

South Windsor

State

CT

Zip Code

06074-2303

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR223703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

287.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Gideon A. Pell

Mailing Address 61 Holbrook Drive

City

Stamford

State

CT

Zip Code

06906-1514

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR2243703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Donald G. Presley

Mailing Address 4502 Obispo Avenue

City

Lakewood

State

CA

Zip Code

90712-3647

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Life Product Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR22573703

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Mark Koskovich

Mailing Address 5717 Cavender Drive

City

Plano

State

TX

Zip Code

75093-5966

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR22843703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

367.72

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jonathan R. Jaramillo

Mailing Address 11 Byram Dock Street

City

Greenwich

State

CT

Zip Code

06830

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR22903703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Peter P. Chan

Mailing Address 7805 E Starbright Court

City

Tucson

State

AZ

Zip Code

85750-7048

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR23143703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. Anthony G. Epps

Mailing Address 16 Hartford Lane

City

White Plains

State

NY

Zip Code

10603-1113

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR2333703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

245.53

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 107 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Earl S. Prolman

Mailing Address 45 Wood Street

City

Nashua

State

NH

Zip Code

03064-1929

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.20

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR233703

Amount of Each Receipt this Period

20.84

P/R Deduction (\$20.84 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Gayle A. Yeomans

Mailing Address 777 W End Avenue
Apt. 4C

City

New York

State

NY

Zip Code

10025-5551

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR23423703

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Joan M. Cronin

Mailing Address 15 Steven Drive Apt. 7

City

Ossining

State

NY

Zip Code

10562-1977

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR2363703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

110.84

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Dirk Welzien

Mailing Address 254 Gale Ridge Court

City

San Ramon

State

CA

Zip Code

94582-3000

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR24055993703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Veronica E. McCarthy

Mailing Address 67118 Dartmouth Street

City

Forest Hills

State

NY

Zip Code

11375-4148

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR2503703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Maryann Ingenito

Mailing Address 305 Edinboro Road

City

Staten Island

State

NY

Zip Code

10306-1204

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR2523703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

275.68

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael G. Gallo

Mailing Address 4 Red Mill Lane

City

Darien

State

CT

Zip Code

06820-3612

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Senior Vice President

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR2583703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Cordell Hoffer

Mailing Address 65 Otterkill Road

City

New Windsor

State

NY

Zip Code

12553-8830

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR2593703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Mo-
nthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Enrico R. Sorrentino

Mailing Address 1256 Turnbury Lane

City

North Wales

State

PA

Zip Code

19454-3658

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Managing Partner

Aggregate Year-to-Date ▼

769.30

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR2623703

Amount of Each Receipt this Period

76.93

P/R Deduction (\$76.93 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

397.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Jacqueline A. O'Leary

Mailing Address 52 Clyde Street

City

New Hyde Park

State

NY

Zip Code

11040-2433

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR2643703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Solomon Goldfinger

Mailing Address 14719 70th Avenue

City

Flushing

State

NY

Zip Code

11367-1715

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR2673703

Amount of Each Receipt this Period

67.70

P/R Deduction (\$33.85 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Lawrence Gordon

Mailing Address 200 E. 32nd Street
Apt. 16B

City

New York

State

NY

Zip Code

10016-6521

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR2783703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

156.18

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Robert D. Rock

Mailing Address 8 Park Place

City

Short Hills

State

NJ

Zip Code

07078-2826

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Senior Vice President

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR2793703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Richard Rossow

Mailing Address 5310 Harbor Court Drive

City

Alexandria

State

VA

Zip Code

22315

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Corporate Vice President

Aggregate Year-to-Date ▼

346.25

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR28242533703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. John Y. Kim

Mailing Address 7 Northeast Road

City

Farmington

State

CT

Zip Code

06032

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Executive Vice President

Aggregate Year-to-Date ▼

307.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR28242563703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

230.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Walden J. Rooney

Mailing Address 5 Mountain View Boulevard

City

South Burlington

State

VT

Zip Code

05403-5825

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR283703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Patrick G. Boyle

Mailing Address 7 Holmes Court

City

Morristown

State

NJ

Zip Code

07960-2776

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.20

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR2853703

Amount of Each Receipt this Period

92.40

P/R Deduction (\$46.20 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Eileen T. Slevin

Mailing Address 32 Dykers Farm Road

City

North Haledon

State

NJ

Zip Code

07508-2649

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR2893703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

180.88

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Joel A. Shapiro

Mailing Address 200 E 66th Street Apt. D302

City

New York

State

NY

Zip Code

10065-9188

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR2933703

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Douglas Lathrop

Mailing Address 2311 North Utah Street

City

Arlington

State

VA

Zip Code

22207

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR29430673703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Paul Delisio

Mailing Address 99 Wildflower Lane

City

Shokan

State

NY

Zip Code

12481-5322

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR3043703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

287.19

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael M. Oleske

Mailing Address 59 the Neck

City

Manhasset

State

NY

Zip Code

11030-1315

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR3083703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Kenneth H. Hower

Mailing Address 123 W Houston Avenue

City

Clovis

State

CA

Zip Code

93611-3537

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR3193703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Gerard A. Rocchi

Mailing Address 789 Mountain Laurel Road

City

Fairfield

State

CT

Zip Code

06824-2426

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR3513703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

384.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Moshe Lebovits

Mailing Address 6 Israel Zupnick Drive Unit 201

City

Monroe

State

NY

Zip Code

10950-6301

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR3533703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Robert J. Smith

Mailing Address 39856 Morningside Drive

City

Rancho Mirage

State

CA

Zip Code

92270-3016

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR3663703

Amount of Each Receipt this Period

120.00

P/R Deduction (\$120.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jules DelVecchio

Mailing Address 4 Sackett Circle

City

Larchmont

State

NY

Zip Code

10538-1002

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR3793703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Oliviero

Mailing Address 63 Wellington Road

City

Garden City

State

NY

Zip Code

11530-4149

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

First Vice President

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR3823703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Salvatore F. Farina

Mailing Address 99 Parkside Drive
Box 800

City

Point Lookout

State

NY

Zip Code

11569

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Managing Partner

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR3853703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. James M. Lauzon

Mailing Address 8 New Castle Drive

City

Avon

State

CT

Zip Code

06001-3151

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

288.45

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR393703

Amount of Each Receipt this Period

57.69

P/R Deduction (\$57.69 Monthly)

SUBTOTAL of Receipts This Page (optional)

250.03

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Frank M. Boccio

Mailing Address 18 Williamson Street

City

East Rockaway

State

NY

Zip Code

11518-1919

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR3943703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Richard A. Wadsworth

Mailing Address 2211 Chardonay Terrace

City

Parrish

State

FL

Zip Code

34219-1208

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR4063703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Ms. Alison J. Flaum

Mailing Address 15506 Clover Ridge

City

San Antonio

State

TX

Zip Code

78248-1333

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2083.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR4093703

Amount of Each Receipt this Period

416.66

P/R Deduction (\$416.66 Mo-
nthly)

SUBTOTAL of Receipts This Page (optional)

620.52

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 118 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Kathleen A. Donnelly

Mailing Address 47 Southview Circle

City

Lake Grove

State

NY

Zip Code

11755-2244

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR4103703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Eric S. Rubin

Mailing Address 419 Freeman Avenue

City

Oceanside

State

NY

Zip Code

11572-4506

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR4163703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Edward J. Kaminski

Mailing Address 63 Fern Street

City

Floral Park

State

NY

Zip Code

11001-3207

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR4233703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

384.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 119 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Neil Glynn

Mailing Address 9301 S Hoyne Avenue

City

Chicago

State

IL

Zip Code

60643-6306

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR438033703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Anthony L. Miller

Mailing Address 1460 S Prairie Avenue

City

Chicago

State

IL

Zip Code

60605-2884

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Second Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.75

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR4383703

Amount of Each Receipt this Period

62.50

P/R Deduction (\$31.25 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Bradford L. Meigs

Mailing Address 3 Harvest Lane

City

Hingham

State

MA

Zip Code

02043-4233

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR443703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

329.17

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. James O. DeVito

Mailing Address 42 Pembroke Way

City

Bedford

State

NH

Zip Code

03110

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448643703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Craig A. Forman

Mailing Address 5020 W 18th Avenue

City

Kennewick

State

WA

Zip Code

99338-1847

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448663703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Richard P. Simonetti

Mailing Address 24 Red Oak Lane

City

Cortlandt Manor

State

NY

Zip Code

10567

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448683703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

269.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 121 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Kinh-Huu Lam

Mailing Address 991 Lurline Drive

City

State

Zip Code

Foster City

CA

94404-1832

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448723703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Darin Fass

Mailing Address 30 Carlton Drive

City

State

Zip Code

Mount Kisco

NY

10549-4756

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448733703

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Steven J. Kramer

Mailing Address 12125 Lexington Park Drive
Unit #207

City

State

Zip Code

Tampa

FL

33626

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448743703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 / 268

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. William Grub

Mailing Address 3655 North Point Parkway

City

Alpharetta

State

GA

Zip Code

30005

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Zone Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448753703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gregory D. Tyson

Mailing Address 1122 Garden Street

City

Hoboken

State

NJ

Zip Code

07030-4305

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448783703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Amelia Scott

Mailing Address 3920 Arkwright Road
Suite 160

City

Macon

State

GA

Zip Code

31210-1744

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448803703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

269.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Romany S. Abraham

Mailing Address 3350 Hampshire Road

City

State

Zip Code

Furlong

PA

18925-1254

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448813703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Brett Bargery

Mailing Address 505 Liberty Court

City

State

Zip Code

Colleyville

TX

76034-7619

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.85

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448843703

Amount of Each Receipt this Period

30.78

P/R Deduction (\$15.39 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Robert J. Blake

Mailing Address 100 Anderson Street
Suite 412

City

State

Zip Code

Pittsburgh

PA

15219

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448853703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

119.26

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David A. Harland

Mailing Address 200 East 66th Street
Apt. B-1505

City State Zip Code
New York NY 10065-9179

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448903703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Robert A. Hodgkiss

Mailing Address 5824 Fairmount Avenue

City State Zip Code
Downers Grove IL 60516-1411

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448913703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. George M. Kay

Mailing Address 300 Ivy Springs Court

City State Zip Code
Waxhaw NC 28173

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448923703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

307.74

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph J. La Pietra

Mailing Address 12601 Split Creek Court

City

North Potomac

State

MD

Zip Code

20878-3999

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448933703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Mark J. Madgett

Mailing Address 24634 Southeast 9th Place

City

Sammamish

State

WA

Zip Code

98074-3447

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448953703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jerry B. McKinney

Mailing Address 2601 25th Street Southeast
Suite 350

City

Salem

State

OR

Zip Code

97302-1283

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448963703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

461.58

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 126 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Roland Ghazal

Mailing Address 3111 Danielle Court

City

Livermore

State

CA

Zip Code

94550-6888

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.55

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448973703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Joyce B. Russell

Mailing Address 1005 Fraser Avenue Southeast

City

Huntsville

State

AL

Zip Code

35801-3138

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior General Office Agency Standards

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448983703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Kenneth N. Savoie

Mailing Address 5383 Chaucers Court

City

Roanoke

State

VA

Zip Code

24018-4600

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.55

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR448993703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

357.72

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael F. Scovel

Mailing Address 4960 Goodman Avenue
#4311

City State Zip Code
Addison TX 75001

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR449003703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jeff Bacchas

Mailing Address 8 Gregory Court

City State Zip Code
Farmingville NY 11738-4203

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR449043703

Amount of Each Receipt this Period

45.00

P/R Deduction (\$22.50 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Mehmood N. Daya

Mailing Address 22106 Grand Cove Court

City State Zip Code
Katy TX 77450-8097

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR449053703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

275.80

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Troy K. Holman

Mailing Address 3 Ashwood Lane

City

Malvern

State

PA

Zip Code

19355

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR449073703

Amount of Each Receipt this Period

70.00

P/R Deduction (\$35.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Kyle T. Williamson

Mailing Address 6805 Beckworth Lane

City

Plano

State

TX

Zip Code

75024-7536

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Zone Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR449123703

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Robert P. Mason

Mailing Address 12241 Lexington Park Drive
Apt. 201

City

Tampa

State

FL

Zip Code

33626-2725

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR449143703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

263.86

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 129 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Raj Bakshi

Mailing Address 7526 E Camino Amistoso

City

Tucson

State

AZ

Zip Code

85750

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR449163703

Amount of Each Receipt this Period

1000.00

P/R Deduction (\$1000.00
Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Scott A. Cleveland

Mailing Address 1233 E Riversong Drive

City

Eagle

State

ID

Zip Code

83616-5568

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR449173703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Sandra C. Ngo

Mailing Address 622 Ruscello Court

City

El Dorado Hills

State

CA

Zip Code

95762-5531

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

A.V.P. - China Regional Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR449193703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

1076.96

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 130 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Elaine Williams

Mailing Address 503 Webster Avenue

City

Uniondale

State

NY

Zip Code

11553-1841

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.88

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR449203703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Mark A. Heck

Mailing Address 500 Cliffwood Avenue
Apt. #D-9

City

Matawan

State

NJ

Zip Code

07747-2825

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Financial Analysis Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR449223703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Michael Gavin

Mailing Address 117 Allenhurst Circle

City

Franklin

State

TN

Zip Code

37067-7272

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.09

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR455483703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

203.88

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 131 / 268

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Kelly S. Dowell

Mailing Address 165 Clubhouse Circle

City

Fairhope

State

AL

Zip Code

36532-3384

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR455523703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. William P. Tate

Mailing Address 29355 Regency Circle

City

Westlake

State

OH

Zip Code

44145-6705

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR455573703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Joseph C. Suellentrop

Mailing Address 9401 Redbud Lane

City

Lenexa

State

KS

Zip Code

66220-3437

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR455613703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

230.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 132 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph M. Bennett

Mailing Address 1432 Holiday Park Drive

City

Wantagh

State

NY

Zip Code

11793-2540

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.56

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR4563703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Dominick Nuzzi

Mailing Address 21 Chambry Court

City

Freehold

State

NJ

Zip Code

07728-9067

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR4583703

Amount of Each Receipt this Period

125.00

P/R Deduction (\$125.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. James P. McNicholas

Mailing Address 32 Kinzley Street

City

Little Ferry

State

NJ

Zip Code

07643-1006

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR467683703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

251.94

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David L. Brass

Mailing Address 541 Polaris Street

City

North Babylon

State

NY

Zip Code

11703-1507

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Regional Manager - Life Product Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR4703703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Joseph M. Franklin

Mailing Address 33 Round Hill Road

City

Washingtonville

State

NY

Zip Code

10992-2020

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR4763703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Richard J. Pinkos

Mailing Address 16 Carolyn Terrace

City

Chicopee

State

MA

Zip Code

01020-3543

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR483703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

121.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 134 / 268

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Victor R. Miranda

Mailing Address 124 Southeast Rio Casarano

City

Port St. Lucie

State

FL

Zip Code

34984-6618

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR5013703

Amount of Each Receipt this Period

125.00

P/R Deduction (\$125.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey Leiderman

Mailing Address 8491 Egret Lakes Lane

City

West Palm Beach

State

FL

Zip Code

33412-1526

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR5033703

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. John Dipalermo

Mailing Address 3297 Padilla Way

City

San Jose

State

CA

Zip Code

95148-2746

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR5043703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

291.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 135 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David R. Tarella

Mailing Address 489 Stage Road

City

Charlton

State

NY

Zip Code

12019-2704

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR5093703

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Brian M. O'Neill

Mailing Address 45 Saint Michaels Te

City

Carmel

State

NY

Zip Code

10512-2006

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.56

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR5103703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Mary Hallahan

Mailing Address 172 Wayne Avenue

City

River Edge

State

NJ

Zip Code

07661-1106

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR5123703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

228.88

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Irving Flamer

Mailing Address 3 Linden Lane

City

Old Westbury

State

NY

Zip Code

11568-1609

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR5193703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas P. Shea

Mailing Address 20 Makanna Drive

City

Huntington

State

NY

Zip Code

11743-2935

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR5273703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Howard Levy

Mailing Address 14 Strafford Lane

City

Bedford

State

NH

Zip Code

03110-4536

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR5343703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

349.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 137 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Robert H. Petrocelli, Jr.

Mailing Address 10 Byrd Street

City

Rye

State

NY

Zip Code

10580-2407

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR5373703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Jeanmarie A. Deliso

Mailing Address 43 Primrose Drive

City

Longmeadow

State

MA

Zip Code

01106-2531

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR540193703

Amount of Each Receipt this Period

83.00

P/R Deduction (\$83.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Andrew W. Rawding

Mailing Address 19 Herald Drive

City

Queensbury

State

NY

Zip Code

12804-9187

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR540603703

Amount of Each Receipt this Period

90.00

P/R Deduction (\$45.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

339.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 138 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Douglas A. Schultz

Mailing Address 10222 Oconnell Avenue

City

Mokena

State

IL

Zip Code

60448-3329

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR540663703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)

B.

Full Name (Last, First, Middle Initial)

Ms. Adrian L. Williams

Mailing Address 20008 Northwest 85th Avenue

City

Miami

State

FL

Zip Code

33015-6933

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR540803703

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Ms. Mary Joanne Petretto

Mailing Address 1468 West Street

City

Guilford

State

CT

Zip Code

06437-1075

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR542113703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

208.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Wayne Thomas

Mailing Address 29 Cycas

City

Kenner

State

LA

Zip Code

70065-6188

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR542493703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Robert D. Hartman

Mailing Address 1351 Fairway

City

Kyle

State

TX

Zip Code

78640-8767

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR542563703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Aeramy Porter

Mailing Address 8024 Greenbriar Court

City

Wichita

State

KS

Zip Code

67226-1834

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR542823703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

138.48

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Ben Freedman

Mailing Address 143 Amoretti Street

City

Lander

State

WY

Zip Code

82520-2816

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR542863703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Neal L. Waters

Mailing Address 213 Sawtelle Street

City

Henderson

State

NV

Zip Code

89074-5391

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR542923703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Linda Hulbert

Mailing Address 1619 Moose Trail
PO Box 81402

City

Fairbanks

State

AK

Zip Code

99708-1402

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR5443703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

133.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 141 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael F. Barry

Mailing Address 3 Evergreen Lane

City

Walpole

State

MA

Zip Code

02081-2142

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR547623703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Kris Gulbran

Mailing Address 3236 Cascadia Avenue S

City

Seattle

State

WA

Zip Code

98144-7024

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR547673703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Todd Purich

Mailing Address 6332 Battlevue Drive

City

Raleigh

State

NC

Zip Code

27613-7148

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR547683703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

375.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 142 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey E. Thol

Mailing Address 736 High Street

City

Honesdale

State

PA

Zip Code

18431-1738

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR547713703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Missy Gaynor

Mailing Address 180 Peace Acre Lane

City

Stratford

State

CT

Zip Code

06614-1306

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR5573703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Frank Scarpa

Mailing Address 5 Abbington Way

City

Morristown

State

NJ

Zip Code

07960-3314

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR5593703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

278.87

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 143 / 268

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Roberto Recine

Mailing Address 12800 Cumberland Circle

City

Anchorage

State

AK

Zip Code

99516-2746

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.55

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR5613703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)**B.**

Full Name (Last, First, Middle Initial)

Mr. Akshay Madan

Mailing Address 775 Oneida Trail

City

Franklin Lakes

State

NJ

Zip Code

07417-2216

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR5653703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)**C.**

Full Name (Last, First, Middle Initial)

Mr. Michael F. Broderick Cfp

Mailing Address 170 Clapboardtree Street

City

Westwood

State

MA

Zip Code

02090-2906

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR566153703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Mo-
nthly)

SUBTOTAL of Receipts This Page (optional)

474.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 144 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Don L. Lippencott

Mailing Address 5790 Marina Drive Apt. 3

City

Sebastian

State

FL

Zip Code

32958-8020

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR566163703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jeff Perryman

Mailing Address 270 Spectacular Street

City

Henderson

State

NV

Zip Code

89052-5907

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR566173703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. James M. Smith

Mailing Address 6414 Hickorycrest Drive

City

Spring

State

TX

Zip Code

77389-5230

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR566283703

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00)

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 145 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael E. Sproule

Mailing Address 16 Middle Beach Road

City

Madison

State

CT

Zip Code

06443-3053

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR5703703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jefferson C. Boyce

Mailing Address 28 Inwood Street

City

Yonkers

State

NY

Zip Code

10704-2802

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR575123703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Barbara J. McInerney

Mailing Address 35 Sutton Place
Apt. 4E

City

New York

State

NY

Zip Code

10022-2464

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR575133703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

307.74

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David L. Mussehl

Mailing Address 48 Desert Willow

City

Irvine

State

CA

Zip Code

92606

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Managing Partner

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR575223703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Cheong H. Tsang

Mailing Address 1974 Troy Avenue

City

Brooklyn

State

NY

Zip Code

11234-3020

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Senior Partner

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR575253703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Ralph K. Sklar

Mailing Address 6632 Liggett Drive

City

Oakland

State

CA

Zip Code

94611-3204

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR5753703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

357.72

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 147 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Marilyn W. Arnold

Mailing Address Box 812

32 Fieldstone Lane

City

Medford

State

NJ

Zip Code

08055-3515

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR575503703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Bradley J. Jensen

Mailing Address 1625 Southeast Bristol Drive

City

Waukee

State

IA

Zip Code

50263

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR575543703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. William J. Terry, III

Mailing Address 43 Winchester Road

City

Arlington

State

MA

Zip Code

02474-1019

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.79

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR575553703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

384.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 148 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David A. Odom

Mailing Address 24719 Bogey Ridge

City

San Antonio

State

TX

Zip Code

78260-4805

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR575573703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Kevin E. Boland

Mailing Address 3993 Howard Hughes Parkway
#500

City

Las Vegas

State

NV

Zip Code

89169-6700

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR575603703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Eric Cox

Mailing Address 136 Cape May Lane

City

Mount Pleasant

State

SC

Zip Code

29464-6500

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.50

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR575613703

Amount of Each Receipt this Period

115.40

P/R Deduction (\$57.70 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

423.12

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 149 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Hugh J. Smith

Mailing Address 10 Rock Road

City

Attleboro

State

MA

Zip Code

02703-4454

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR575633703

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Francisjoo Ok

Mailing Address 18 Robinhood Drive

City

Mountain Lakes

State

NJ

Zip Code

07046-1462

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR575643703

Amount of Each Receipt this Period

500.00

P/R Deduction (\$500.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Thomas J. Troeller

Mailing Address 12 Crape Myrtle Drive

City

Holmdel

State

NJ

Zip Code

07733-1529

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.88

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR5823703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

656.94

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 150 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Mark W. Pfaff

Mailing Address 330 Stockbridge Road

City

Charlotte

State

VT

Zip Code

05445-9356

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR5843703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Nicola Iannitelli

Mailing Address 148 Brittany Court

City

Clifton

State

NJ

Zip Code

07013-2672

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR586133703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Frank Lusk

Mailing Address 15185 Wood Duck Trail Northwest

City

Prior Lake

State

MN

Zip Code

55372-3209

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR586153703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

384.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 151 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Bernard J. Zweig

Mailing Address 393 W End Avenue Apt. 9D

City

New York

State

NY

Zip Code

10024-6141

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR6023703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Mo-
nthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Scot R. Bradstreet

Mailing Address PO Box 415

City

Stratham

State

NH

Zip Code

03885-0415

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR603703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Mo-
nthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jonathan T. Paone

Mailing Address 57 Van Doren Avenue

City

Chatham

State

NJ

Zip Code

07928-2213

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.55

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR605963703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

420.53

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Mario W. Lazzaro, Jr.

Mailing Address 74 Sequams Lane W

City

West Islip

State

NY

Zip Code

11795-4527

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.56

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR6063703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Paul M. Holmes

Mailing Address 3200 Beechleaf Court
Suite 820

City

Raleigh

State

NC

Zip Code

27604-1063

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.55

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR606413703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. John S. Hamel

Mailing Address 184 Perry Avenue

City

Norwalk

State

CT

Zip Code

06850-1137

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.99

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR611893703

Amount of Each Receipt this Period

96.18

P/R Deduction (\$48.09 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

326.98

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Johnson Kho

Mailing Address 110 Westminster Road

City

Scarsdale

State

NY

Zip Code

10583-2425

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR6123703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. John P. Border

Mailing Address 12720 Crown Crest Drive

City

Bakersfield

State

CA

Zip Code

93311-8568

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR613093703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Ralph P. Owen

Mailing Address 3317 Highway 63

City

Bloomfield

State

IA

Zip Code

52537-8063

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR613273703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

266.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 154 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jose Narvaez

Mailing Address 3516 34th Street Apt. 6F

City

Long Island City

State

NY

Zip Code

11106-1929

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR613473703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Bob Chrisman

Mailing Address 2660 Augusta Drive Apt. G303

City

Houston

State

TX

Zip Code

77057-5867

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR613633703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. William Campbell

Mailing Address 66 Snowberry Drive

City

South Portland

State

ME

Zip Code

04106-6857

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.53

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR613673703

Amount of Each Receipt this Period

38.46

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

163.47

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 155 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. William E. Mahoney, Jr.

Mailing Address 936 Intracoastal Drive Apt. 14F

City

Fort Lauderdale

State

FL

Zip Code

33304-3666

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR613703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Larry E. Botts

Mailing Address 3015 E Leestown Road

City

Midway

State

KY

Zip Code

40347-9769

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR613773703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Donald E. Lippencott

Mailing Address 10 Hawkins Avenue

City

Setauket

State

NY

Zip Code

11733-3911

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR613823703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

383.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 156 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Allen W. St Amour

Mailing Address 1477 Sharkey Road

City

Traverse City

State

MI

Zip Code

49686-8202

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR613933703

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Wei-Sheng Wang

Mailing Address 9 Orchard Way

City

Warren

State

NJ

Zip Code

07059-5060

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR614083703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Gregory P. Genovese

Mailing Address 14 Woodcutters Lane

City

Cold Spring Harbor

State

NY

Zip Code

11724-1206

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR614163703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

291.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Randall D. Hart

Mailing Address 3547 State Route 7

City

New Waterford

State

OH

Zip Code

44445-8719

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR614243703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Russell Bicker

Mailing Address 125 Poplar Forest Drive

City

Slippery Rock

State

PA

Zip Code

16057-8527

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR614353703

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. John Pereira

Mailing Address 2815 E 10th Street

City

The Dalles

State

OR

Zip Code

97058-4020

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR614373703

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

SUBTOTAL of Receipts This Page (optional)

208.33

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 158 / 268

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Alvin R. Barnett

Mailing Address 126 Meadow Street

City

Garden City

State

NY

Zip Code

11530-6600

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	9

Transaction ID: PR614403703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. John T. Blanks

Mailing Address 1603 Langhorne Road

City

Lynchburg

State

VA

Zip Code

24503-3117

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	9

Transaction ID: PR614443703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Rodney S. Ferguson

Mailing Address 466 Blackwolf Run Drive

City

Wildwood

State

MO

Zip Code

63040-1571

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	9

Transaction ID: PR614463703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

375.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 159 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Mary L. Stockton

Mailing Address 3545 32nd Street

City

San Diego

State

CA

Zip Code

92104-4304

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR614493703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas J. Kanaley

Mailing Address 150 Lenox Way

City

San Francisco

State

CA

Zip Code

94127-1113

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR614523703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. William S. Bennett, Jr.

Mailing Address 20708 Northeast 90th Street

City

Redmond

State

WA

Zip Code

98053-5205

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR614663703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Paul J. Haye

Mailing Address 6475 Dowling Road

City

Perrysburg

State

OH

Zip Code

43551-9514

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR614753703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Brian Ruh

Mailing Address 23702 W Steintal Road

City

Kiel

State

WI

Zip Code

53042-4994

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR614853703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Harvey C. Krautschun

Mailing Address PO Box 157

City

Spearfish

State

SD

Zip Code

57783-0157

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2083.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR614863703

Amount of Each Receipt this Period

416.66

P/R Deduction (\$416.66 Monthly)

SUBTOTAL of Receipts This Page (optional)

625.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Mark J. McAdams

Mailing Address 8801 N FM 620 Apt. 623

City

Austin

State

TX

Zip Code

78726-3517

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR614973703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Boyd Phillips

Mailing Address 14191 Highway 221

City

Marion

State

NC

Zip Code

28752-7552

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR615263703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Robert J. Hebron

Mailing Address 231 Wyoming Avenue

City

Maplewood

State

NJ

Zip Code

07040-2013

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR6153703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

168.61

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Kurt Anderson

Mailing Address 13038 Village Chase Circle

City

Tampa

State

FL

Zip Code

33618-8359

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Development Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.02

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR615473703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jonathan B. Swaney

Mailing Address 3 Muirfield Road

City

Falmouth

State

ME

Zip Code

04105-1178

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR615663703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Barry A. Schub

Mailing Address 4 Wren Court

City

Morristown

State

NJ

Zip Code

07960-6346

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR615693703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

165.42

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 163 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Michele M. Kenaga

Mailing Address 3 Pequot Drive

City

Norwalk

State

CT

Zip Code

06855-1607

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR615723703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Ron Rapp

Mailing Address #10 Cottonwood Landing
101 E 4th Street

City

South Sioux City

State

NE

Zip Code

68776-1761

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR632093703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Alan H. Shortell

Mailing Address 161 Farrington Avenue

City

Sleepy Hollow

State

NY

Zip Code

10591-1304

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR632163703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

118.63

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Julia A. Warren

Mailing Address 78 Crest Drive

City

South Orange

State

NJ

Zip Code

07079-1037

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Senior Managing Director

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR6333703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. James J. Coffee

Mailing Address 327 Lakeside Dr. N

City

Forked River

State

NJ

Zip Code

08731-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Corporate Vice President

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR6373703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Diane H. Gould

Mailing Address 1102 Prospect Hill Place

City

Rockville

State

MD

Zip Code

20850-2868

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Agent

Aggregate Year-to-Date ▼

1041.75

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR6383703

Amount of Each Receipt this Period

208.35

P/R Deduction (\$208.35)

SUBTOTAL of Receipts This Page (optional)

400.69

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Bernee V. Kapili M.D.

Mailing Address 200 East End Avenue
Apt. 14G

City State Zip Code
New York NY 10128-7891

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR642423703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Paul B. Whitman

Mailing Address 29 Broad Hill Circle

City State Zip Code
Guilford CT 06437-1722

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Assistant General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR642473703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Mark E. Arning

Mailing Address 25 Schuyler Avenue

City State Zip Code
Rockville Center NY 11570-2521

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR642493703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

192.36

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 166 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Arthur H. Seter

Mailing Address 1 Merion Drive

City

State

Zip Code

Purchase

NY

10577-1301

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR642663703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Carol S. Mayer

Mailing Address 16 Rolling Ridge Road

City

State

Zip Code

U Saddle River

NJ

07458-1525

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.75

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR642683703

Amount of Each Receipt this Period

38.50

P/R Deduction (\$19.25 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Elizabeth W. McCarthy

Mailing Address 124 College Place

City

State

Zip Code

South Orange

NJ

07079-2506

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR642733703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

346.22

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 167 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael Arnheiter

Mailing Address 220 N Falmouth Highway

City

North Falmouth

State

MA

Zip Code

02556-3102

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR6453703

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Douglas W. Pelz

Mailing Address 2404 E Thomas Hill Drive

City

Coeur D Alene

State

ID

Zip Code

83815-6334

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR645433703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Ellen M. Coletto

Mailing Address 61 Chester Avenue

City

Brooklyn

State

NY

Zip Code

11218-2020

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR647103703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 168 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Harry W. DeHaven

Mailing Address 9065 Bethel Road

City

Gainesville

State

GA

Zip Code

30506-3963

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR647193703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. John A. Foster

Mailing Address 13 Earldom Way

City

Getzville

State

NY

Zip Code

14068

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR647203703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Robert Karmen

Mailing Address 23 Evergreen Parkway

City

Westport

State

CT

Zip Code

06880-2529

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.68

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR647213703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

138.48

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 169 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Gordon

Mailing Address 39 East 29th Street
Apt. 6A

City State Zip Code
New York NY 10016-7904

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR652033703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Steven M. Jacobsberg

Mailing Address 23 Hampton Court

City State Zip Code
Port Washington NY 11050-3020

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR652053703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Puneet Seth

Mailing Address 2 Betsy Ross Court

City State Zip Code
East Brunswick NJ 08816-3264

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR654343703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

242.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 170 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. John P. Curry

Mailing Address 905 Foxhollow Run

City

Alpharetta

State

GA

Zip Code

30004-0959

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR654353703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Brett A. Nanna

Mailing Address 12102 Golden Harvest Drive

City

Fort Wayne

State

IN

Zip Code

46845-8995

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR654383703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Daniel F. Clements

Mailing Address 600 Rosinccress Court

City

San Ramon

State

CA

Zip Code

94582-5079

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR654393703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

269.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 171 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Brian R. Lescinkas

Mailing Address 9737 E Mount Pleasant Drive

City

Tucson

State

AZ

Zip Code

85749-9357

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.09

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR654483703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Angelo J. Scialabba

Mailing Address 47 Lake Shore Drive

City

Eastchester

State

NY

Zip Code

10709-5216

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR654533703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Juan R. Job

Mailing Address 9 West 31st Street
8C

City

New York

State

NY

Zip Code

10001

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR654573703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

230.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 172 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Kevin Curry

Mailing Address 75 Upland Road

City

New Milford

State

CT

Zip Code

06776-2102

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR654653703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Craig A. Lafferty

Mailing Address 26 Laurelwood Court

City

Medford

State

NJ

Zip Code

08055-8364

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR6573703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Anthony R. Malloy

Mailing Address 329 Beechwood Road

City

Ridgewood

State

NJ

Zip Code

07450-2306

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR6583703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

349.39

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 173 / 268

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Sheila K. Davidson

Mailing Address 45 East Ninth Street
Apt. 6/7City State Zip Code
New York NY 10003-6307FEC ID number of contributing
federal political committee.**C**Name of Employer
New York Life Insurance
CompanyOccupation
Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR6593703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)**B.**

Full Name (Last, First, Middle Initial)

Mr. Wesley Morris

Mailing Address 789 Rock Springs Road

City State Zip Code
Kingsport TN 37664-5265FEC ID number of contributing
federal political committee.**C**Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR659873703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)**C.**

Full Name (Last, First, Middle Initial)

Ms. Victoria C. Vilaret

Mailing Address 21 81st Avenue

City State Zip Code
Treasure Island FL 33706-5212FEC ID number of contributing
federal political committee.**C**Name of Employer
New York Life Insurance
CompanyOccupation
First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR660213703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

287.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 174 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jean-Louis M. Pedat

Mailing Address 148 West 70th Street
Apt. 8

City State Zip Code
New York NY 10023-4412

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR660223703

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. John A. Cullen

Mailing Address 527 Parkview Avenue

City State Zip Code
Westfield NJ 07090-2403

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR660233703

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Helen M. Napoli

Mailing Address 2 Oxford Road

City State Zip Code
North Caldwell NJ 07006-4216

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR660253703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 175 / 268

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Nathan W. Fincher

Mailing Address 206 Casting Street Southeast

City

Albany

State

OR

Zip Code

97322-7347

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Development Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR660263703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)**B.**

Full Name (Last, First, Middle Initial)

Mr. Leonard J. Mackesy

Mailing Address 8 Hillside Avenue

City

Kearny

State

NJ

Zip Code

07032-1633

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR660273703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-
Weekly)**C.**

Full Name (Last, First, Middle Initial)

Mr. Ronald O. McCombs

Mailing Address 1663 Baywood Drive

City

Concord

State

CA

Zip Code

94521-1252

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Director of Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR670033703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

253.86

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 176 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Marci P. Landaas

Mailing Address 11932 Middlebury Drive

City

Tampa

State

FL

Zip Code

33626-2520

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.56

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR670073703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Alexander A. Burbatsky

Mailing Address 9 Stepping Stone Crescent

City

Dix Hills

State

NY

Zip Code

11746-5011

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR670133703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Ronald J. Terry

Mailing Address 55 Rustic Gate Lane

City

Dix Hills

State

NY

Zip Code

11746-6138

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR670263703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

153.90

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 177 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Dennis V. Westgard

Mailing Address 1819 Kent Street

City

Westbury

State

NY

Zip Code

11590-5305

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR670293703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Stephen A. Bloom

Mailing Address 40 Southall Lane

City

Red Bank

State

NJ

Zip Code

07701-5761

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR6703703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Joseph A. Daley

Mailing Address 11 High Point Road

City

Westport

State

CT

Zip Code

06880-3906

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR670373703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

115.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 178 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Kathleen E. Scollan

Mailing Address 306 Longvue Terrace

City

Yonkers

State

NY

Zip Code

10710-2113

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR670563703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Peter Brigando

Mailing Address 64 Musiker Avenue

City

Randolph

State

NJ

Zip Code

07869-4610

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR670593703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Susan J. Mullen

Mailing Address 133 E Santa Barbara Road

City

Lindenhurst

State

NY

Zip Code

11757-6711

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR670673703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

115.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Susan A. Thrope

Mailing Address 56 Random Farms Drive

City

Chappaqua

State

NY

Zip Code

10514-1015

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR670733703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Frederick B. Van Blaricom

Mailing Address 57 Deer Ridge Road

City

Wingdale

State

NY

Zip Code

12594-1855

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR670903703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. George E. Silos

Mailing Address 385 Larch Avenue

City

Bogota

State

NJ

Zip Code

07603-1056

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.08

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR6713703

Amount of Each Receipt this Period

57.70

P/R Deduction (\$28.85 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

250.04

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 180 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Mark W. Talgo

Mailing Address 5 Stony Hill Road

City

West Harrison

State

NY

Zip Code

10604-1504

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR672133703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gregory F. Appel

Mailing Address 113 Park Road Extension

City

Goldens Brg

State

NY

Zip Code

10526-1144

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR672423703

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Dennis M. Cleary

Mailing Address 9343 246th Street

City

Floral Park

State

NY

Zip Code

11001-3922

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR672433703

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

118.48

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 181 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Kimberly Johnson

Mailing Address 200 Clinton Avenue Northwest
Suite 600

City State Zip Code
Huntsville AL 35801-4933

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR672573703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Joseph J. Hogan

Mailing Address 8448 Eagle Preserve Way

City State Zip Code
Sarasota FL 34241-9449

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR672613703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Donna J. Caruso

Mailing Address 5253 Willow Court

City State Zip Code
Cape Coral FL 33904-5664

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR6783703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

130.15

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 182 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Margaret DeCesare

Mailing Address 9-5 Foxwood Drive

City

Pleasantville

State

NY

Zip Code

10570-1139

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR686893703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Christopher J. Viveiros

Mailing Address 12 Jacobs Point Road

City

Warren

State

RI

Zip Code

02885

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR691853703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. John T. Baier

Mailing Address 12 Skytop Drive

City

Denville

State

NJ

Zip Code

07834-9542

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR6923703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

230.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Izhak Asher

Mailing Address 29 Center Drive

City

Roslyn

State

NY

Zip Code

11576-1445

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR694573703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Harris Kagan

Mailing Address 1608 Pandora Avenue

City

Los Angeles

State

CA

Zip Code

90024-6114

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR694623703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Steven Bumbara

Mailing Address 1617 Dumont Terrace

City

Wall Township

State

NJ

Zip Code

07719-3846

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR694703703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

258.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 184 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Leonard Isaacs

Mailing Address 66 Boulder Ridge Road

City

Scarsdale

State

NY

Zip Code

10583-3150

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR694713703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Hammond Cobb

Mailing Address 8218 Longneedle Drive

City

Montgomery

State

AL

Zip Code

36117-5125

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR695083703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey Fitzpatrick

Mailing Address 103 Prospect Avenue

City

Waterloo

State

IA

Zip Code

50703-4241

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR695293703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

191.67

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 185 / 268

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Gary Myers

Mailing Address 10825 Southwest 83rd Terrace

City

Augusta

State

KS

Zip Code

67010-8025

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	9

Transaction ID: PR695433703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Mo-
nthly)**B.**

Full Name (Last, First, Middle Initial)

Mr. Brandon R. Paulsen

Mailing Address 2816 N Tallgrass Street

City

Wichita

State

KS

Zip Code

67226-1815

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	9

Transaction ID: PR695443703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)**C.**

Full Name (Last, First, Middle Initial)

Mr. Brandon S. Handy

Mailing Address 2172 S 825 E

City

Clearfield

State

UT

Zip Code

84015-6246

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	9

Transaction ID: PR695513703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

288.49

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 186 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Marc Bregman

Mailing Address 11701 E Kettleman Lane

City

Lodi

State

CA

Zip Code

95240-9707

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR695703703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Milo Abadilla

Mailing Address 3308 Moncucco Court

City

San Jose

State

CA

Zip Code

95148-4348

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR695833703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Leslie C. Griffin

Mailing Address 290 Third Avenue
24A

City

New York

State

NY

Zip Code

10010

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR696393703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

285.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 187 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Anna E. Dominguez

Mailing Address 32-20 41 Street

City

Astoria

State

NY

Zip Code

11103-3522

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR696533703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Marguerite E. Morrison

Mailing Address 20 West 86th Street
#6A

City

New York

State

NY

Zip Code

10024-3604

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR696603703

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Victor A. Verastegui

Mailing Address 5404 Avenal Drive

City

Lutz

State

FL

Zip Code

33558-2823

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR696673703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

116.96

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 188 / 268

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Bik Y. Tsang

Mailing Address 1974 Troy Avenue

City

Brooklyn

State

NY

Zip Code

11234-3020

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR7003703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Mo-
nthly)**B.**

Full Name (Last, First, Middle Initial)

Ms. Julia Hsiao

Mailing Address 19701 Northampton Drive

City

Saratoga

State

CA

Zip Code

95070-3333

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR706753703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)**C.**

Full Name (Last, First, Middle Initial)

Mr. William F. Leisman, III

Mailing Address 4 Orchard Avenue

City

Weston

State

MA

Zip Code

02493-2219

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR706803703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

300.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 189 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Joel Steele

Mailing Address 22 Belmont Circle

City

Columbus

State

NJ

Zip Code

08022-9714

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR707003703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. John A. Christopher

Mailing Address 8251 Pembridge Avenue

City

Woodridge

State

IL

Zip Code

60517-7733

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR707083703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. P. J. Demarie, III

Mailing Address 24 Woodvine Court

City

Covington

State

LA

Zip Code

70433-4724

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR707093703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

375.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 190 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey C. Williams

Mailing Address 317 Sharondale Drive

City

El Paso

State

TX

Zip Code

79912-4257

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR707113703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Glenn Jagodzinske

Mailing Address 6623 Southwest Gisbourne Court

City

Topeka

State

KS

Zip Code

66614-4455

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR707133703

Amount of Each Receipt this Period

30.00

P/R Deduction (\$30.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Joe K. Lau

Mailing Address 11278 E Del Golfo

City

Yuma

State

AZ

Zip Code

85367-8959

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR707163703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 191 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael D. Dixon

Mailing Address 5055 Pathfinder Avenue

City

Oak Park

State

CA

Zip Code

91377-4704

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR707183703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Don Wilson

Mailing Address PO Box 91372

City

Anchorage

State

AK

Zip Code

99509-1372

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR707203703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Gregory W. Holmgren

Mailing Address 3340 Wolf Willow Close

City

Milton

State

GA

Zip Code

30004

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Zone Life Sales Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR707283703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

293.61

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 192 / 268

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Lee Kitzenberg

Mailing Address 5814 Vernon Lane

City

Edina

State

MN

Zip Code

55436-2250

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR712603703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)**B.**

Full Name (Last, First, Middle Initial)

Mr. Ronald F. Walker

Mailing Address 1575 Fairway Drive

City

Los Altos

State

CA

Zip Code

94024-5342

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR712623703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Mo-
nthly)**C.**

Full Name (Last, First, Middle Initial)

Mr. Jan Larsen

Mailing Address 2008 123rd Avenue Northeast
PO Box 669

City

Lake Stevens

State

WA

Zip Code

98258-0669

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.52

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR712633703

Amount of Each Receipt this Period

20.84

P/R Deduction (\$20.84 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

270.85

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 193 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Bill Van Winkle

Mailing Address 41 Breezy Point Road

City

Little Silver

State

NJ

Zip Code

07739-1703

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR7173703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Michael Gisonda

Mailing Address 2402 Northwest 36th Street

City

Boca Raton

State

FL

Zip Code

33431-5415

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR717543703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Michael Shock

Mailing Address 21 Rebecca Lane

City

Conway

State

AR

Zip Code

72034-4961

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR717613703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

233.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 194 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Heedo Han

Mailing Address 148 S Maple Drive

City

Beverly Hills

State

CA

Zip Code

90212-3381

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR717663703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. George R. Shadie

Mailing Address Sand Springs
57 Teaberry Drive

City

Drums

State

PA

Zip Code

18222-2051

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR7243703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Daniel Stoll

Mailing Address 16 Kingston Circle

City

Lockport

State

NY

Zip Code

14094-5606

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR725193703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

383.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 195 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Raouf Salib

Mailing Address 1221 Mill Creek Road

City

Flint

State

MI

Zip Code

48532-2348

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR725293703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Christopher O. Blunt

Mailing Address 9 Yarmouth Road

City

Rowayton

State

CT

Zip Code

06853-1842

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR729573703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Scott L. Lenz

Mailing Address 41 Bellevue Avenue

City

Summit

State

NJ

Zip Code

07901-2007

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR729593703

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

380.53

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 196 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. John M. Hayes

Mailing Address 7 Sun Valley Way

City

Long Valley

State

NJ

Zip Code

07853-3038

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR729603703

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Stuart L. Ashton

Mailing Address 173 Washington Valley Road

City

Morristown

State

NJ

Zip Code

07960-3340

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR734483703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Edward J. Fitzgerald

Mailing Address 121 Stratford Road

City

West Hempstead

State

NY

Zip Code

11552-1723

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR734553703

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

216.94

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 197 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Randy K. Cox

Mailing Address 541 Oak Grove Road

City

Chesapeake

State

VA

Zip Code

23320-3723

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR734623703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Fredric V. Collins

Mailing Address 1713 Monk Place

City

Mount Pleasant

State

SC

Zip Code

29466-7016

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR734633703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. C. Mack Deas, Jr.

Mailing Address 1069 Inverness Cove Way

City

Birmingham

State

AL

Zip Code

35242

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR734643703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

269.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 198 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Scott G. Ayers

Mailing Address 40 Tabor Place

City

South Burlington

State

VT

Zip Code

05403-5609

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR734653703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gregory T. Yezpe

Mailing Address 6 Calle Vallecitos

City

Tijeras

State

NM

Zip Code

87059-7870

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR734673703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Kevin L. Baumberger

Mailing Address 11715 N 178th Circle

City

Bennington

State

NE

Zip Code

68007-5742

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.79

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR734703703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

407.72

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 199 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Scott L. Berlin

Mailing Address 22 Jerome Road

City

Syosset

State

NY

Zip Code

11791-3207

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR734713703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Scott E. Stone

Mailing Address 3445 Stratford Road
3203

City

Atlanta

State

GA

Zip Code

30326-1722

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR734753703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Gayl Thomas

Mailing Address 3044 Ten Mile Drive

City

Sparks

State

NV

Zip Code

89436-7027

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR734813703

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

283.86

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 200 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas S. Heller

Mailing Address 230 Mahwah Road

City

Mahwah

State

NJ

Zip Code

07430-1440

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR734863703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Paul J. Appel

Mailing Address 2019 Hemlock Farms
110 Wagoner Lane

City

Hawley

State

PA

Zip Code

18428-9073

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR734873703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Irwin Silber

Mailing Address 104 McNamara Road

City

Spring Valley

State

NY

Zip Code

10977-1406

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR734943703

Amount of Each Receipt this Period

58.00

P/R Deduction (\$29.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

134.96

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 201 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Richard M. Walsh

Mailing Address 32 Hilltop Road

City

Waccabuc

State

NY

Zip Code

10597-1003

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR735033703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Lindsay J. Malkiewich

Mailing Address 7 Bent Birch Place

City

Parsippany

State

NJ

Zip Code

07054-2215

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR735043703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. John B. Langdon

Mailing Address 4109 Michael Neill Drive

City

Austin

State

TX

Zip Code

78730-1432

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR735183703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 202 / 268

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. James M. Vaeth

Mailing Address 2087 Natalie Boulevard

City

Seaford

State

NY

Zip Code

11783-2434

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Corporate Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR735213703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)**B.**

Full Name (Last, First, Middle Initial)

Mr. Binh Q. Nguyen

Mailing Address 572 Misty Mountain Lane

City

Roanoke

State

VA

Zip Code

24012

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR735233703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)**C.**

Full Name (Last, First, Middle Initial)

Mr. Thomas A. Clough

Mailing Address 172 Summer Avenue

City

Reading

State

MA

Zip Code

01867-2824

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR735253703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

115.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. John F. Horwitz

Mailing Address 168 Upland Road

City

Sharon

State

MA

Zip Code

02067-1749

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Senior Director of Development

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR741583703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas G. Young

Mailing Address 10300 Salida Drive

City

Austin

State

TX

Zip Code

78749-6918

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Assistant Vice President

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR741863703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Peter J. McAvinn

Mailing Address 49 Fiske Road

City

Wellesley

State

MA

Zip Code

02481-3423

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Managing Partner

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR743703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

253.86

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael J. Pagano

Mailing Address 390 Forest Avenue

City

Glen Ridge

State

NJ

Zip Code

07028-1908

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR745043703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Mark B. Magnus

Mailing Address 10 Abbey Lane

City

Rehoboth

State

MA

Zip Code

02769-2230

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Second Vice President - Consulting Act

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR745133703

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Sam Mancino

Mailing Address 106 Four Winds Drive

City

Middletown

State

NJ

Zip Code

07748-3143

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR745163703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

116.96

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Monique A. McClure

Mailing Address 350 Grand Avenue

City

Brooklyn

State

NY

Zip Code

11238

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR745223703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Stephen P. Fisher

Mailing Address 601 Fairmont Avenue

City

Westfield

State

NJ

Zip Code

07090-1360

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR745283703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. William T. Feakes

Mailing Address 9445 Nicklaus Lane

City

Crystal Lake

State

IL

Zip Code

60014-3340

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Annuity Product Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR745423703

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

116.96

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. John C. Austin

Mailing Address 13104 Glenfield Road

City

Leawood

State

KS

Zip Code

66209-1798

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Field Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	9

Transaction ID: PR745433703

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Bruce Cumby

Mailing Address 816 Ellis Avenue

City

Newtown Sq

State

PA

Zip Code

19073-3906

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	9

Transaction ID: PR7473703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. John M. Angiulli

Mailing Address 1059 Old Orchard Drive

City

Gibsonia

State

PA

Zip Code

15044-6081

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	9

Transaction ID: PR7483703

Amount of Each Receipt this Period

125.00

P/R Deduction (\$125.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

206.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Barbara N. Filippelli

Mailing Address 5170 Dove Point Lane

City

Salisbury

State

MD

Zip Code

21801-1273

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR7493703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Nguyen B. Mai

Mailing Address 600 Trapelo Road
Apt. 15

City

Waltham

State

MA

Zip Code

02452-7996

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR763703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Ms. Tema L. Steele

Mailing Address 104 Van Buren Road

City

Voorhees

State

NJ

Zip Code

08043-2354

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR7643703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

255.15

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael T. Piotrowicz

Mailing Address 504 Anthony Drive

City

Plymouth Meeting

State

PA

Zip Code

19462-1040

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2083.30

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR7773703

Amount of Each Receipt this Period

416.66

P/R Deduction (\$416.66 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Edward W. Colello

Mailing Address 42 Scenic Ridge Drive

City

Brewster

State

NY

Zip Code

10509-4303

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR783703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Amato Berardi

Mailing Address 52 Pine View Drive

City

Huntingdon Vv

State

PA

Zip Code

19006-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR7853703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

543.60

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey A. Morrison

Mailing Address 1451 Radbill Circle

City

Berwyn

State

PA

Zip Code

19312-2502

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR7963703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Joseph A. Auteri

Mailing Address 2515 Garrett Road

City

Drexel Hill

State

PA

Zip Code

19026-1010

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR7973703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. John Rocco Clu Msfs

Mailing Address 16 Midland Road

City

Lynnfield

State

MA

Zip Code

01940-1265

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.65

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR803703

Amount of Each Receipt this Period

83.33

P/R Deduction (\$83.33 Monthly)

SUBTOTAL of Receipts This Page (optional)

333.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Terrence L. Wolf

Mailing Address 119 Great Circle Road

City

Landenberg

State

PA

Zip Code

19350-9110

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR8173703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gilbert A. Ridgely

Mailing Address 314 Mannering Drive

City

Dover

State

DE

Zip Code

19901-5407

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR8193703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Ronald D. Jones

Mailing Address 1261 Lake Vue Drive

City

Butler

State

PA

Zip Code

16002-7625

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR8383703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

183.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Mary A. McGinley

Mailing Address 98 Hillcrest Lane

City

Peekskill

State

NY

Zip Code

10566-6925

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR842113703

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Robert P. Ducato Clu Chfc

Mailing Address 10 Franklin Street

City

Westfield

State

NY

Zip Code

14787-1009

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR8433703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Cynthia J. Guldy

Mailing Address 2026 Yankee Drive

City

Windsor

State

CO

Zip Code

80550-4685

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR849073703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

165.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Bernard Zaleski

Mailing Address 9461 Cross Creek Court

City

Wichita

State

KS

Zip Code

67206-4066

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR849183703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. David A. Herlicka

Mailing Address 12 Knoll Crest Drive

City

Bedford

State

NH

Zip Code

03110-6041

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR849233703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Frank J. Feola

Mailing Address 6039 Walden Court

City

Mentor

State

OH

Zip Code

44060-2221

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR849263703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

266.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 213 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Michael S. Anderson

Mailing Address 29002 Acanthus Court

City

Agoura

State

CA

Zip Code

91301-1629

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR849273703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Hershey Mittelman

Mailing Address 1219 56th Street

City

Brooklyn

State

NY

Zip Code

11219-4560

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR849303703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Jennifer Leisman

Mailing Address 19 Holyoke Street Apt. 2

City

Boston

State

MA

Zip Code

02116-5855

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR849553703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

191.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 214 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. John W. Lehman

Mailing Address 9350 Rocky Water Court

City

Sylvania

State

OH

Zip Code

43560

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.96

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR849563703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Irving A. Rose

Mailing Address 3 Tree Hollow Lane

City

Dix Hills

State

NY

Zip Code

11746-6315

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR849623703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Sylvia M. Forster

Mailing Address 29129 N 20th Avenue

City

Phoenix

State

AZ

Zip Code

85085

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR849743703

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

161.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 215 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Matthew E. Vahl

Mailing Address 1419 Pine Cove Court

City

Darien

State

IL

Zip Code

60561-4999

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR849763703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Edward S. Ritchie

Mailing Address 1775 Beacon Street

City

Waban

State

MA

Zip Code

02468-1402

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR853163703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jenkins Mikell, III

Mailing Address 8 Lord Nelson Court

City

Columbia

State

SC

Zip Code

29209-1910

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR853183703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

171.82

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 216 / 268

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David L. Johnson

Mailing Address 27694 Highway 30

City

Glidden

State

IA

Zip Code

51443-8807

FEC ID number of contributing
federal political committee.**C**Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	0	9

Transaction ID: PR853193703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)**B.**

Full Name (Last, First, Middle Initial)

Mr. David L. Towry, Sr.

Mailing Address 574 Harbortown Court Southeast

City

Salem

State

OR

Zip Code

97306-9355

FEC ID number of contributing
federal political committee.**C**Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	0	9

Transaction ID: PR853223703

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Mon-
thly)**C.**

Full Name (Last, First, Middle Initial)

Mr. John T. Richards

Mailing Address 5801 Papaya Place Northeast

City

Albuquerque

State

NM

Zip Code

87111-6223

FEC ID number of contributing
federal political committee.**C**Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	0	9

Transaction ID: PR853263703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

208.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 217 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Brian Winter

Mailing Address 1513 Oxford Road

City

Wantagh

State

NY

Zip Code

11793-2445

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR853273703

Amount of Each Receipt this Period

150.00

P/R Deduction (\$150.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. David Lynch

Mailing Address 3901 Custis Road

City

Richmond

State

VA

Zip Code

23225-1105

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR853293703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Lydia Patricio

Mailing Address 2627 Alemany Boulevard

City

San Francisco

State

CA

Zip Code

94112-4101

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR853303703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

241.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 218 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Romeo Lazzarone

Mailing Address 2080 Brittany Meadows Drive

City

Reno

State

NV

Zip Code

89521-5271

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR853403703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Michael P. Lackey

Mailing Address 25 Zaitz Farm Road

City

Princeton Junction

State

NJ

Zip Code

08550-3314

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.66

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR853503703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Paul T. Pasteris

Mailing Address 534 Farm Road

City

Fayston

State

VT

Zip Code

05673-7258

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR853513703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

272.47

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 219 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Joel M. Steinberg

Mailing Address 44 Spruce Street

City

Princeton Junction

State

NJ

Zip Code

08550-2019

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR8553703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Shauna L. Soper

Mailing Address 11855 Villa Creek Avenue

City

Baton Rouge

State

LA

Zip Code

70810-7341

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR856673703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Robert Ziegler

Mailing Address 11 Windham Loop
Apt. 4Ee

City

Staten Island

State

NY

Zip Code

10314-5937

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR860973703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

234.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 220 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. William Mattox

Mailing Address 3742 N Tazewell Street

City

Arlington

State

VA

Zip Code

22207-4572

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

First Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR860983703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas F. English

Mailing Address 27 Hedge Brook Lane

City

Stamford

State

CT

Zip Code

06903-2029

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR8633703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. David Walsh

Mailing Address 150 Vista Grande

City

Greenbrae

State

CA

Zip Code

94904-1135

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR863703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

420.53

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 221 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Scott F. Della Penna

Mailing Address 9541 Purcell Drive

City

Potomac

State

MD

Zip Code

20854-4500

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR8673703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. John J. O'Gara

Mailing Address 8 Rock Ridge Court

City

New Fairfield

State

CT

Zip Code

06812-3300

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR870913703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Thomas S. McArdle

Mailing Address 10 Boyd Road

City

Hazlet

State

NJ

Zip Code

07730-1461

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR871013703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

230.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Adam G. Clemens

Mailing Address 161 E 79th Street
Apt. 8B

City State Zip Code
New York NY 10075-0480

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR871083703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Michael G. Dubrow

Mailing Address 181 East 90th Street
Apt. 8C

City State Zip Code
New York NY 10128-2389

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.84

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR871093703

Amount of Each Receipt this Period

46.16

P/R Deduction (\$23.08 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Wayne J. Francingues, Jr.

Mailing Address 2408 Fagot Avenue

City State Zip Code
Metairie LA 70001-4209

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR871323703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

126.31

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Kenneth J. Hittel

Mailing Address 250 W 90th Street
Apt. 10H

City State Zip Code
New York NY 10024-1142

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.88

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR8723703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Frank R. Jones

Mailing Address 500 Virginia Street East
Suite 1100

City State Zip Code
Charleston WV 25301-2151

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR875453703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Bradley K. Wright

Mailing Address 5528 Ash Grove Circle

City State Zip Code
Montgomery AL 36116-1150

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR875483703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

153.90

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 224 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Mark S. Niziak

Mailing Address 7 Cutler Street

City

Hopedale

State

MA

Zip Code

01747-1001

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR875583703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Ms. Alison H. Micucci

Mailing Address 16 Munsey Road

City

Emerson

State

NJ

Zip Code

07630-1512

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR875593703

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jonathan G. Sailer

Mailing Address 12 Cherry Lane

City

Port Jeff Station

State

NY

Zip Code

11776-1206

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR875623703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

116.96

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Helen J. Stagias

Mailing Address 3079 48th Street

City

Astoria

State

NY

Zip Code

11103-1524

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR875733703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Tony H. Elavia

Mailing Address 12 Windsor Court

City

Purchase

State

NY

Zip Code

10577-1000

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR875823703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Roy Stachnik

Mailing Address 326 Main Street Suite 230

City

Grand Junction

State

CO

Zip Code

81501-2476

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR880603703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

359.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jason Apolenis

Mailing Address 12810 Navigators Lane

City

Gaithersburg

State

MD

Zip Code

20878-6115

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR880633703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Richard C. Schwartz

Mailing Address 744 High Woods Drive

City

Franklin Lakes

State

NJ

Zip Code

07417-2272

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR880653703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. B. Christopher Stokes

Mailing Address 3657 Patuxent River Road

City

Davidsonville

State

MD

Zip Code

21035-2422

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR8833703

Amount of Each Receipt this Period

125.00

P/R Deduction (\$125.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

445.53

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Milton A. Dugger, Jr.

Mailing Address 904 Dartmouth Road

City

Baltimore

State

MD

Zip Code

21212-3225

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR8843703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Robin M. Wahby

Mailing Address 385 Royal Tern Rd. S

City

Ponte Vedra

State

FL

Zip Code

32082-6209

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR8883703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Xavier Decaire

Mailing Address 8 Pacer Court

City

Newark

State

DE

Zip Code

19711-2414

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR8903703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

295.53

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Karen Stawicki

Mailing Address 14976 Venado Drive

City

Rncho Murieta

State

CA

Zip Code

95683-9323

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR893703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Arphiela Arizmendi

Mailing Address 12 Prince Henry Drive

City

Randolph

State

NJ

Zip Code

07869-1257

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.88

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR893873703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Christopher Battersby

Mailing Address 51 Mitchell Road

City

Holliston

State

MA

Zip Code

01746-2469

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR897663703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

410.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Toby Bishop

Mailing Address 117 50th Avenue E

City

West Fargo

State

ND

Zip Code

58078-8247

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR900653703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Simon Bloomfield

Mailing Address 2091 Main Street

City

Brewster

State

MA

Zip Code

02631-1819

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR901523703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jesse Bond

Mailing Address 603 Northwest 127th Street

City

Seattle

State

WA

Zip Code

98177-4238

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR902183703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Mo-
nthly)

SUBTOTAL of Receipts This Page (optional)

362.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Andrew Bondar

Mailing Address 3693 Halter Court

City

Sacramento

State

CA

Zip Code

95821-3267

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR902193703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Rob Ostberg

Mailing Address 48 Greenleaf Drive

City

Northampton

State

MA

Zip Code

01062-9768

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR903703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Bill Weimer

Mailing Address 7234 Hanover Grove Lane

City

Mechanicsville

State

VA

Zip Code

23111-5633

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR9063703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

375.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Tamara Burke

Mailing Address 2103 12th Avenue

City

Belle Fourche

State

SD

Zip Code

57717-2211

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR907093703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Chad Burtrum

Mailing Address 10267 Wake Robin Drive

City

Grand Blanc

State

MI

Zip Code

48439-9354

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR907393703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Mark A. Campellone

Mailing Address 61 Reed Dr. S

City

Princeton Junction

State

NJ

Zip Code

08550-2014

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR908923703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

133.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 232 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Dan Carson

Mailing Address 689 Forrest Haven Court

City

Greenville

State

SC

Zip Code

29609-6522

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR910313703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Timothy C. Carter

Mailing Address 4945 Stonehaven Drive

City

Yorba Linda

State

CA

Zip Code

92887-2635

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR910533703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Daniel C. Caswell

Mailing Address 3008 Durban Court

City

Round Rock

State

TX

Zip Code

78664-6226

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR911033703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

125.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 233 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Felix S. Chu

Mailing Address 11 Mercury Court

City

Pleasant Hill

State

CA

Zip Code

94523-2167

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR914423703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)

B.

Full Name (Last, First, Middle Initial)

Ms. Rose A. Gentile

Mailing Address 606 S Payne Street

City

Alexandria

State

VA

Zip Code

22314-3928

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR9173703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. Clint G. Cornette

Mailing Address 1505 Country Club Road

City

Wilmington

State

NC

Zip Code

28403-4818

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR917973703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

175.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 234 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David K. Cote

Mailing Address 20 Driscoll Road

City

Selah

State

WA

Zip Code

98942-9316

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR918293703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gordon E. Parker, Jr.

Mailing Address 422 Discovery Road

City

Virginia Beach

State

VA

Zip Code

23451-2157

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR9183703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67)

C.

Full Name (Last, First, Middle Initial)

Mr. Michael T. Damon

Mailing Address 9 Little Tree Road

City

Medway

State

MA

Zip Code

02053-6131

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR921143703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

291.68

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 235 / 268

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Scott K. McGuire

Mailing Address 1983 Woodlake Drive

City

Benton

State

LA

Zip Code

71006-9305

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	9

Transaction ID: PR9213703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)**B.**

Full Name (Last, First, Middle Initial)

Mr. Lee R. Dean Cfp Msfs

Mailing Address 10 Butler Road

City

Sudbury

State

MA

Zip Code

01776-1514

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	9

Transaction ID: PR922623703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)**C.**

Full Name (Last, First, Middle Initial)

Mr. Kevin Doyle

Mailing Address 589 Atwells Avenue Suite 3H

City

Providence

State

RI

Zip Code

02909-7402

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
CompanyOccupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	9

Transaction ID: PR926873703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

166.68

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 236 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey A. Dunn

Mailing Address 97 West Maple Avenue

City

Fort Mitchell

State

KY

Zip Code

41011

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Director-Income Insurance & Investment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR927883703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Walker R. Ellis, Jr.

Mailing Address 650 Northwest 48th Avenue

City

Coconut Creek

State

FL

Zip Code

33063-4637

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR929493703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. Zach J. Engraff

Mailing Address 3450 Newland Street

City

Wheat Ridge

State

CO

Zip Code

80033-6400

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR929953703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

130.15

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 237 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. A. David Erland

Mailing Address 23813 Northeast 27th Street

City

Sammamish

State

WA

Zip Code

98074-5485

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR930193703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Phil Esquivel

Mailing Address 629 E Kenedy Avenue

City

Kingsville

State

TX

Zip Code

78363-5774

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR930503703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. Terry G. Fenwick

Mailing Address 2309 Stannye Drive

City

Louisville

State

KY

Zip Code

40222-6351

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR932183703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

237.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 238 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Theodore A. Mathas

Mailing Address 14 Cole Drive

City

Armonk

State

NY

Zip Code

10504-3011

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

President & Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR9323703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Stephen C. Fiocco

Mailing Address 122 Bower Lane

City

Forest Hill

State

MD

Zip Code

21050-1749

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR932783703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Nathan Fincham

Mailing Address 2462 Northwest Summerhill Drive

City

Bend

State

OR

Zip Code

97701-5290

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR933043703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

234.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 239 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Cindi R. Fox

Mailing Address 1114 Sunset Drive

City

Kimberly

State

WI

Zip Code

54136-1234

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR934873703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Ryan Frame

Mailing Address 1708 Shetland Lane

City

Spring Hill

State

TN

Zip Code

37174-9525

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR934973703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jim Franson

Mailing Address 36135 N Eagle Court

City

Ingleside

State

IL

Zip Code

60041-9551

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR935313703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

237.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 240 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Jane L. Hamrick

Mailing Address 531 East 88th
3C

City State Zip Code
New York NY 10128-7737

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR9353703

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Zacharias Fthenakis

Mailing Address 99 Whistler Road

City State Zip Code
Manhasset NY 11030-2839

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR936133703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. Robert C. Gaillard

Mailing Address 7517 Grenade Court

City State Zip Code
Crp Christi TX 78414-6291

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR936633703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

140.15

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 241 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Roxane Kronon Galati

Mailing Address 525 Turtle Hatch Road

City

Naples

State

FL

Zip Code

34103-8540

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR936683703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Joshua Q. Gardner

Mailing Address 2533 Silver Spur Trail

City

Billings

State

MT

Zip Code

59105-3764

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR937553703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. F. C. Hoge

Mailing Address 3027 Golf Colony Drive

City

Salem

State

VA

Zip Code

24153-6833

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR9383703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

278.87

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Troy E. Glover

Mailing Address 6000 Shepherd Mountain Cove
1601

City State Zip Code
Austin TX 78730

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.56

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR939853703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jerry Prentice

Mailing Address 6003 Wilmington Drive

City State Zip Code
Burke VA 22015-3823

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR9423703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. Richard L. Haden, Jr.

Mailing Address 4515 Ridgcrest Lane

City State Zip Code
Colonial Heights VA 23834-2212

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR944313703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

201.95

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 243 / 268

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Sidney Halpern

Mailing Address 8 Pebblebrook Lane

City

Moreland Hills

State

OH

Zip Code

44022-2380

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR945083703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Ms. Mary Lou Hamill

Mailing Address 183 Biltmore Drive

City

North Barrington

State

IL

Zip Code

60010-2001

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR945263703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. George O. Hudspeth

Mailing Address 8482 Oak Meadow Drive

City

Beaumont

State

TX

Zip Code

77706-3700

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR953063703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

133.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Stanley Hunter

Mailing Address 411 Theodore Fremd Avenue

City

Rye

State

NY

Zip Code

10580-1410

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR953733703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Timothy D. Hutto

Mailing Address 922 Milwaukee
Apt. 2207

City

Lubbock

State

TX

Zip Code

79416

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR954033703

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Justin M. Iverson

Mailing Address 14675 Southwest Sage Drive

City

Powell Butte

State

OR

Zip Code

97753-1718

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR955023703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

131.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David F. Keefe

Mailing Address 116 Mill Street

City

Newton Center

State

MA

Zip Code

02459-1127

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR961143703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Noel I. Kellert

Mailing Address 13201 Squires Court

City

North Potomac

State

MD

Zip Code

20878-3987

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR961393703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Richard G. Kelly

Mailing Address 32 Marlboro Street

City

Norwood

State

MA

Zip Code

02062-1212

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR961563703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)

171.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 246 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Gerald F. Hall

Mailing Address 15 Fieldstone Drive

City

Westport

State

MA

Zip Code

02790-2634

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR963703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. James Adkins, Jr.

Mailing Address 10200 Wendover Drive

City

Vienna

State

VA

Zip Code

22181-2960

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR9653703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Karen J. Lamp

Mailing Address 201 E 21st Street
Apt. 20J

City

New York

State

NY

Zip Code

10010-6426

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR967053703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

246.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Jason Leonard

Mailing Address 84 Minton Lane

City

West Barnstable

State

MA

Zip Code

02668-1817

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.23

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR970483703

Amount of Each Receipt this Period

153.86

P/R Deduction (\$76.93 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Christopher R. Lewis

Mailing Address 2340 North Hills Street Suite G
PO Box 3429

City

Meridian

State

MS

Zip Code

39303

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR971103703

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Dan Kunhardt

Mailing Address 11 Madison Circle

City

Greenfield

State

MA

Zip Code

01301-2703

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR973703

Amount of Each Receipt this Period

125.00

P/R Deduction (\$125.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

317.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. James Lutz

Mailing Address 4539 Whitney Drive

City

Noblesville

State

IN

Zip Code

46062

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Development Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.24

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR975023703

Amount of Each Receipt this Period

41.68

P/R Deduction (\$20.84 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Rowan G. MacDonald

Mailing Address 201 Railroad Avenue
235

City

East Rutherford

State

NJ

Zip Code

07073

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR975423703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

Mr. Brian G. Madgett

Mailing Address 188 Dove Creek Lane

City

Danville

State

CA

Zip Code

94506

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation

Zone Life Sales Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR975723703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

195.56

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Christopher Matheson

Mailing Address 18 River Rock Court

City

Azusa

State

CA

Zip Code

91702

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.17

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR979333703

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

Mr. Jason Matthews

Mailing Address 4021 Rockford Drive

City

Antioch

State

CA

Zip Code

94509-6919

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR979593703

Amount of Each Receipt this Period

166.67

P/R Deduction (\$166.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Philip K. McCall

Mailing Address 105 Wyndham Circle

City

Boalsburg

State

PA

Zip Code

16827-1674

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR980703703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

285.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Akiva Miller

Mailing Address 1626 49th Street

City

Brooklyn

State

NY

Zip Code

11204-1133

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR985243703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Mon-
thly)

B.

Full Name (Last, First, Middle Initial)

Mr. Gary Miller

Mailing Address 1211 E Nicolet Avenue

City

Phoenix

State

AZ

Zip Code

85020-5118

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR985413703

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Mon-
thly)

C.

Full Name (Last, First, Middle Initial)

Mr. Jay P. Miller

Mailing Address 5407 Landon Circle

City

Boynton Beach

State

FL

Zip Code

33437-1677

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR985523703

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Mon-
thly)

SUBTOTAL of Receipts This Page (optional)

175.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 251 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. Rick L. Ness

Mailing Address 9642 S 161st Street

City

Omaha

State

NE

Zip Code

68136-1468

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR992173703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. James Bergeron

Mailing Address 905 Bosley Road

City

Cockeysville

State

MD

Zip Code

21030-3111

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR9923703

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Edward E. O'Brien

Mailing Address 805 Westover Avenue Unit Drive

City

Norfolk

State

VA

Zip Code

23507-1539

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR994623703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

183.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 252 / 268

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mr. David Oestreicher

Mailing Address 10 Timberlane Drive

City

Williamsville

State

NY

Zip Code

14221-1422

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR995023703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas H. Pace

Mailing Address 6510 Daisy Drive

City

Arlington

State

TX

Zip Code

76017-4970

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR996843703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. Karen M. Palmer

Mailing Address 645 Kindig Road

City

Littlestown

State

PA

Zip Code

17340-9169

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Life Insurance
Company

Occupation
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 9

Transaction ID: PR997393703

Amount of Each Receipt this Period

41.67

P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)

125.01

TOTAL This Period (last page this line number only)

67069.83

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 253 / 268

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.	Full Name (Last, First, Middle Initial) Freedom Project, The	Transaction ID: 5152970 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 9
	Mailing Address 631-B Pennsylvania Avenue SE Basement Unit	
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name Freedom Project, The Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type Contribution
B.	Full Name (Last, First, Middle Initial) Matsui For Congress	Transaction ID: 5155539 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 9
	Mailing Address PO Box 1738	
	City Sacramento State CA Zip Code 95812	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Contribution Candidate Name Doris Matsui Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 05 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type Contribution
C.	Full Name (Last, First, Middle Initial) Castor For Congress	Transaction ID: 5155598 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 9
	Mailing Address 301 West Platt Street #385	
	City Tampa State FL Zip Code 33606	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Contribution Candidate Name Kathy Castor Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 11 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type Contribution

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 254 / 268

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Moore For Congress

Mailing Address PO Box 14631

City
Shawnee Mission

State
KS

Zip Code
66285

Purpose of Disbursement
Contribution

Candidate Name
Dennis W. Moore

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: KS District: 03

Transaction ID: 5155599

Date of Disbursement

05 / 01 / 2009

Amount of Each Disbursement this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Larson For Congress

Mailing Address 29 Ruff Circle

City
Glastonbury

State
CT

Zip Code
06033

Purpose of Disbursement
Contribution

Candidate Name
John B. Larson

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CT District: 01

Transaction ID: 5155600

Date of Disbursement

05 / 01 / 2009

Amount of Each Disbursement this Period

2000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Committee to Elect Gary Ackerman

Mailing Address 100 Jericho Quadrangle
Suite 233

City
Jericho

State
NY

Zip Code
11753

Purpose of Disbursement
Contribution

Candidate Name
Gary L. Ackerman

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 05

Transaction ID: 5155637

Date of Disbursement

05 / 01 / 2009

Amount of Each Disbursement this Period

5000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 255 / 268

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Committee to Elect Gary Ackerman

Mailing Address 100 Jericho Quadrangle
Suite 233

City Jericho State NY Zip Code 11753

Purpose of Disbursement
ContributionCandidate Name
Gary L. Ackerman011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 05

Transaction ID: 5155638

Date of Disbursement

05 / 01 / 2009

Amount of Each Disbursement this Period

5000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Friends Of Sam Johnson

Mailing Address P.O. Box 860096

City Plano State TX Zip Code 75086

Purpose of Disbursement
ContributionCandidate Name
Samuel R. Johnson011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 03

Transaction ID: 5168243

Date of Disbursement

05 / 08 / 2009

Amount of Each Disbursement this Period

2000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Crowley For Congress

Mailing Address 84-56 Grand Avenue

City Elmhurst State NY Zip Code 11373

Purpose of Disbursement
ContributionCandidate Name
Joseph Crowley011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 07

Transaction ID: 5168244

Date of Disbursement

05 / 08 / 2009

Amount of Each Disbursement this Period

4000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 256 / 268

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
Donald A. Manzullo For Congress

Mailing Address PO Box 7783

City State Zip Code
Rockford IL 61126Purpose of Disbursement
ContributionCandidate Name
Donald A. ManzulloOffice Sought: ☒ House
☐ Senate
☐ President

State: IL District: 16

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 5168245

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	0	9

Amount of Each Disbursement this Period

2500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Crowley For Congress

Mailing Address 84-56 Grand Avenue

City State Zip Code
Elmhurst NY 11373Purpose of Disbursement
ContributionCandidate Name
Joseph CrowleyOffice Sought: ☒ House
☐ Senate
☐ President

State: NY District: 07

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 5168246

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	0	9

Amount of Each Disbursement this Period

1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Ryan For Congress

Mailing Address P. O. Box 1919

City State Zip Code
Janesville WI 53547Purpose of Disbursement
ContributionCandidate Name
Paul D. RyanOffice Sought: ☒ House
☐ Senate
☐ President

State: WI District: 01

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 5168247

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	0	9

Amount of Each Disbursement this Period

5000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Glacier PAC

Mailing Address 3242 Cummins Way
Ste 603

City State Zip Code
Missoula MT 59802

Purpose of Disbursement
Contribution

Candidate Name
Glacier PAC

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 5168248

Date of Disbursement

05 / 08 / 2009

Amount of Each Disbursement this Period

5000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Lance For Congress

Mailing Address PO Box 225

City State Zip Code
Colonia NJ 07067

Purpose of Disbursement
Contribution

Candidate Name
Leonard Lance

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 07

Transaction ID: 5168249

Date of Disbursement

05 / 08 / 2009

Amount of Each Disbursement this Period

3000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Adrian Smith For Congress

Mailing Address 3321 Avenue I
Suite 6

City State Zip Code
Scottsbluff NE 69361

Purpose of Disbursement
Contribution

Candidate Name
Adrian Smith

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NE District: 03

Transaction ID: 5168250

Date of Disbursement

05 / 08 / 2009

Amount of Each Disbursement this Period

2500.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

10500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 258 / 268

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) Rogers For Congress <hr/> Mailing Address PO Box 581 <hr/> City Brighton State MI Zip Code 48116 <hr/> Purpose of Disbursement Contribution Candidate Name Michael J. Rogers Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 08 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5168251 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 9 </div>
<div style="border: 1px solid black; padding: 2px;"> 011 Category/ Type </div>	Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: center;">2500.00</div> Contribution
B. Full Name (Last, First, Middle Initial) Freedom Project, The <hr/> Mailing Address 631-B Pennsylvania Avenue SE Basement Unit <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement 05-01-2009 Check Voided Candidate Name Freedom Project, The Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5190723 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 0 9 </div> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: center;">-5000.00</div> 05-01-2009 Check Voided
C. Full Name (Last, First, Middle Initial) Freedom Project, The <hr/> Mailing Address 631-B Pennsylvania Avenue SE Basement Unit <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement Contribution Candidate Name Freedom Project, The Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5190724 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 9 </div> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: center;">5000.00</div> Contribution

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 259 / 268

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Friends Of Chris Dodd

Mailing Address PO Box 270701

City
West Hartford

State
CT

Zip Code
06127

Purpose of Disbursement
Contribution

Candidate Name
Christopher J. Dodd

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: CT District:

Transaction ID: 5195530

Date of Disbursement

05 / 22 / 2009

Amount of Each Disbursement this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Scott Garrett for Congress

Mailing Address P.O. Box 905

City
Newton

State
NJ

Zip Code
07860

Purpose of Disbursement
Contribution

Candidate Name
Scott Garrett

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 05

Transaction ID: 5195531

Date of Disbursement

05 / 22 / 2009

Amount of Each Disbursement this Period

1000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Bill Foster For Congress Committee

Mailing Address PO Box 703

City
Geneva

State
IL

Zip Code
60134

Purpose of Disbursement
Contribution

Candidate Name
G. William (Bill) Foster

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 14

Transaction ID: 5195532

Date of Disbursement

05 / 22 / 2009

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 260 / 268

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Bennett Election Committee Inc

Mailing Address 175 South West Temple Suite 650

City State Zip Code
Salt Lake City UT 84101

Purpose of Disbursement
Contribution

Candidate Name
Robert F. Bennett

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: UT District:

Transaction ID: 5195533

Date of Disbursement

05 / 22 / 2009

Amount of Each Disbursement this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Friends Of John Tanner

Mailing Address Post Office Box 1994

City State Zip Code
Union City TN 38281

Purpose of Disbursement
Contribution

Candidate Name
John S. Tanner

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 08

Transaction ID: 5195535

Date of Disbursement

05 / 22 / 2009

Amount of Each Disbursement this Period

1000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Castle Campaign Fund

Mailing Address P.O Box 133

City State Zip Code
Wilmington DE 19899

Purpose of Disbursement
Contribution

Candidate Name
Michael N. Castle

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: DE District: 01

Transaction ID: 5195537

Date of Disbursement

05 / 22 / 2009

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
North Dakota Democratic-Nonpartisan League Party

Mailing Address 1902 East Divide Avenue

City Bismarck State ND Zip Code 58501

Purpose of Disbursement

011

Category/
Type

Candidate Name

North Dakota Democratic-Nonpartisan League Party

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 5195538

Date of Disbursement

05 / 22 / 2009

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
Peters For Congress

Mailing Address PO Box 226

City Bloomfield Hills State MI Zip Code 48303

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Gary Peters

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 09

Transaction ID: 5195539

Date of Disbursement

05 / 22 / 2009

Amount of Each Disbursement this Period

2000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Walden For Congress

Mailing Address PO Box 1091

City Hood River State OR Zip Code 97031

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Gregory P. Walden

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: OR District: 02

Transaction ID: 5195540

Date of Disbursement

05 / 22 / 2009

Amount of Each Disbursement this Period

2000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) Friends Of Blanche Lincoln	Transaction ID: 5195541 Date of Disbursement
Mailing Address PO Box 3197	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 2 / 2 0 0 9</div> </div>
City Little Rock State AR Zip Code 72203	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<div>1000.00</div>
Candidate Name Blanche Lambert Lincoln	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Contribution	
B. Full Name (Last, First, Middle Initial) Arcuri For Congress	Transaction ID: 5195542 Date of Disbursement
Mailing Address P.O. Box 8508	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 2 / 2 0 0 9</div> </div>
City Utica State NY Zip Code 13505	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<div>1000.00</div>
Candidate Name Michael A. Arcuri	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Contribution	
C. Full Name (Last, First, Middle Initial) Guthrie For Congress	Transaction ID: 5195543 Date of Disbursement
Mailing Address PO Box 9639	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 2 / 2 0 0 9</div> </div>
City Bowling Green State KY Zip Code 42102	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<div>1000.00</div>
Candidate Name Steven Brett Guthrie	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Contribution	

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Jackie Speier For Congress

Mailing Address PO Box 112

City
Burlingame

State
CA

Zip Code
94011

Purpose of Disbursement
Contribution

Candidate Name
Jackie Speier

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 12

Transaction ID: 5195544

Date of Disbursement

05 / 22 / 2009

Amount of Each Disbursement this Period

2500.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Tiberi For Congress

Mailing Address 2021 E Dublin Granville Road
Suite 2000

City
Columbus

State
OH

Zip Code
43229

Purpose of Disbursement
Contribution

Candidate Name
Patrick J. Tiberi

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 12

Transaction ID: 5195545

Date of Disbursement

05 / 22 / 2009

Amount of Each Disbursement this Period

3000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Tiberi For Congress

Mailing Address 2021 E Dublin Granville Road
Suite 2000

City
Columbus

State
OH

Zip Code
43229

Purpose of Disbursement
Contribution

Candidate Name
Patrick J. Tiberi

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 12

Transaction ID: 5195546

Date of Disbursement

05 / 22 / 2009

Amount of Each Disbursement this Period

2000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Levin For Congress

Mailing Address P.O. Box 37

City Roseville State MI Zip Code 48066

Purpose of Disbursement
Contribution

Candidate Name
Sander M. Levin

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 12

Transaction ID: 5195547

Date of Disbursement

05 / 22 / 2009

Amount of Each Disbursement this Period

4000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Levin For Congress

Mailing Address P.O. Box 37

City Roseville State MI Zip Code 48066

Purpose of Disbursement
Contribution

Candidate Name
Sander M. Levin

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 12

Transaction ID: 5195549

Date of Disbursement

05 / 22 / 2009

Amount of Each Disbursement this Period

1000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Bill Foster For Congress Committee

Mailing Address PO Box 703

City Geneva State IL Zip Code 60134

Purpose of Disbursement
Contribution

Candidate Name
G. William (Bill) Foster

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 14

Transaction ID: 5196592

Date of Disbursement

05 / 22 / 2009

Amount of Each Disbursement this Period

1500.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Bilirakis for Congress

Mailing Address 610 S. Boulevard

City
Tampa

State
FL

Zip Code
33606

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
Gus Michael Bilirakis

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 09

Transaction ID: 5202194

Date of Disbursement

05 / 29 / 2009

Amount of Each Disbursement this Period

2500.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Friends Of Bill Posey

Mailing Address P.O. Box 360877

City
Melbourne

State
FL

Zip Code
32936

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
Bill Posey

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 15

Transaction ID: 5202195

Date of Disbursement

05 / 29 / 2009

Amount of Each Disbursement this Period

2500.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Citizens for Action

Mailing Address P.O. Box 1535

City
Wilkes-Barre

State
PA

Zip Code
18703

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
Citizens for Action

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 5202196

Date of Disbursement

05 / 29 / 2009

Amount of Each Disbursement this Period

5000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
Roskam For Congress Committee

Mailing Address P. O. Box 713

City Wheaton State IL Zip Code 60187

Purpose of Disbursement
Contribution

Candidate Name
Peter Roskam

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 06

Transaction ID: 5202197

Date of Disbursement

05 / 29 / 2009

Amount of Each Disbursement this Period

3000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Mike Thompson For Congress

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement
Contribution

Candidate Name
Mike Thompson

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 01

Transaction ID: 5202201

Date of Disbursement

05 / 29 / 2009

Amount of Each Disbursement this Period

500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Friends Of Jim Clyburn

Mailing Address PO Box 12567

City Columbia State SC Zip Code 29211

Purpose of Disbursement
Contribution

Candidate Name
James E. Clyburn

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: SC District: 06

Transaction ID: 5202202

Date of Disbursement

05 / 29 / 2009

Amount of Each Disbursement this Period

2500.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

98500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Citizens for Hottinger

Mailing Address 2135 Horns Hill Road

City
NewarkState
OHZip Code
43055Purpose of Disbursement
Non Federal ContributionCandidate Name
Jay Hottinger011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 71

Transaction ID: 5202193

Date of Disbursement

M M / D D / Y Y Y Y
0 5 / 2 9 / 2 0 0 9

Amount of Each Disbursement this Period

250.00

Non Federal Contribution

SUBTOTAL of Disbursements This Page (optional)

250.00

TOTAL This Period (last page this line number only)

250.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Rhonda Lancaster

Mailing Address 449 W 153rd Street Apt. 32

City
New York

State
NY

Zip Code
10031-1107

Purpose of Disbursement
Void Check Dated 11-20-08

Candidate Name

010
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 5208630

Date of Disbursement

MM / DD / YYYY
05 / 29 / 2009

Amount of Each Disbursement this Period

-15.00

Void Check Dated 11-20-08

SUBTOTAL of Disbursements This Page (optional)

-15.00

TOTAL This Period (last page this line number only)

-15.00